

# TSD File Inventory Index

Date: January 17, 2001

Initial: CMG/ewas

Facility Name: <u>Van Waters &amp; Rogers (Dechlorination Facility)</u>			
Facility Identification Number: <u>14D 000 819 938 (see folder file)</u>			
<b>A.1 General Correspondence</b>		<b>B.2 Permit Docket (B.1.2)</b>	
<b>A.2 Part A / Interim Status</b>		.1 Correspondence	
.1 Correspondence	Y	.2 All Other Permitting Documents (Not Part of the ARA)	
.2 Notification and Acknowledgment	Y	<b>C.1 Compliance - (Inspection Reports)</b>	X
.3 Part A Application and Amendments	X	<b>C.2 Compliance/Enforcement</b>	X
.4 Financial Insurance (Sudden, Non Sudden)		.1 Land Disposal Restriction Notifications	
.5 Change Under Interim Status Requests		.2 Import/Export Notifications	
.6 Annual and Biennial Reports		<b>C.3 FOIA Exemptions - Non-Releasable Documents</b>	
<b>A.3 Groundwater Monitoring</b>		<b>D.1 Corrective Action/Facility Assessment</b>	Y
.1 Correspondence		.1 RFA Correspondence	
.2 Reports		.2 Background Reports, Supporting Docs and Studies	
<b>A.4 Closure/Post Closure</b>	Y	.3 State Prelim. Investigation Memos	
.1 Correspondence	X	.4 RFA Reports	Y
.2 Closure/Post Closure Plans, Certificates, etc	Y	<b>D. 2 Corrective Action/Facility Investigation</b>	
<b>A.5 Ambient Air Monitoring</b>		.1 RFI Correspondence	
.1 Correspondence		.2 RFI Workplan	
.2 Reports		.3 RFI Program Reports and Oversight	
<b>B.1 Administrative Record</b>		.4 RFI Draft /Final Report	

Total - 1



.5 RFI QAPP		.7 Lab data, Soil Sampling/Groundwater	
.6 RFI QAPP Correspondence		.8 Progress Reports	
.7 Lab Data, Soil-Sampling/Groundwater		D.5 Corrective Action/Enforcement	
.8 RFI Progress Reports		.1 Administrative Record 3008(h) Order	
.9 Interim Measures Correspondence		.2 Other Non-AR Documents	
.10 Interim Measures Workplan and Reports		D.6 Environmental Indicator Determinations	
D.3 Corrective Action/Remediation Study		.1 Forms/Checklists	
.1 CMS Correspondence		E. Boilers and Industrial Furnaces (BIF)	
.2 Interim Measures		.1 Correspondence	
.3 CMS Workplan		.2 Reports	
.4 CMS Draft/Final Report		F Imagery/Special Studies (Videos, photos, disks, maps, blueprints, drawings, and other special materials.)	
.5 Stabilization		G.1 Risk Assessment	
.6 CMS Progress Reports		.1 Human/Ecological Assessment	
.7 Lab Data, Soil-Sampling/Groundwater		.2 Compliance and Enforcement	
D.4 Corrective Action Remediation Implementation		.3 Enforcement Confidential	
.1 CMI Correspondence		.4 Ecological - Administrative Record	
.2 CMI Workplan		.5 Permitting	
.3 CMI Program Reports and Oversight		.6 Corrective Action Remediation Study	
.4 CMI Draft/Final Reports		.7 Corrective Action/Remediation Implementation	
.5 CMI QAPP		.8 Endangered Species Act	
.6 CMI Correspondence		.9 Environmental Justice	

Note: Transmittal Letter to Be Included with Reports.

Comments: Documents do not justify individual folders per schedule.



**A.2 Part A/  
Interim Status**





UNITED STATES  
ENVIRONMENTAL PROTECTION AGENCY  
REGION V

111 West Jackson Blvd.  
CHICAGO, ILLINOIS 60604

APR 16 1982

REPLY TO ATTENTION OF:  
RCRA ACTIVITIES

James E. F. Morgan, Manager  
McKesson Chemical Company  
2055 Hammond Drive  
Schaumburg, Illinois 60193

RE: Interim Status Acknowledgement      USEPA ID No. ILD 000 819 938  
FACILITY NAME: MCKESSON CHEMICAL COMPANY

Dear Mr. Morgan:

This is to acknowledge that the U.S. Environmental Protection Agency (USEPA) has completed processing your Part A Hazardous Waste Permit Application. It is the opinion of this office that the information submitted is complete and that you, as an owner or operator of a hazardous waste management facility, have met the requirements of Section 3005(e) of the Resource Conservation and Recovery Act (RCRA) for Interim Status. However, should USEPA obtain information which indicates that your application was incomplete or inaccurate, you may be requested to provide further documentation of your claim for Interim Status. Our opinion will be reevaluated on the basis of this information.

As an owner or operator of a hazardous waste management facility, you are required to comply with the interim status standards as prescribed in 40 CFR Parts 122 and 265, or with State rules and regulations in those States which have been authorized under Section 3006 of RCRA. In addition, you are reminded that operating under interim status does not relieve you from the need to comply with all applicable State and local requirements.

The printout enclosed with this letter identifies the limit(s) of the process design capacities your facility may use during the interim status period. This information was obtained from your Part A Permit application. If you wish to handle new wastes, to change processes, to increase the design capacity of existing processes, or to change ownership or operational control of the facility, you may do so only as provided in 40 CFR Sections 122.22 and 122.23.

As stated in the first paragraph of this letter, you have met the requirements of 40 CFR Part 122.23; your facility may operate under interim status until such time as a permit is issued or denied. This will be preceded by a request from this office or the State (if authorized) for Part B of your application. Please contact Arthur Kawatachi of my staff at (312) 886-7449, if you have any questions concerning this letter or the enclosure.

Sincerely yours,

Karl J. Klepitsch, Jr., Chief  
Waste Management Branch

Enclosure

cc: M. A. Minor, Regional V.P.

*Handwritten:* H/E  
4/16/82



FACILITY NAME

MCKESSON CHEMICAL COMPANY

EPA ID NUMBER

ILD0000819938

FACILITY OPERATOR

FOREMOST-MCKESSON INC

FACILITY OWNER

FOREMOST-MCKESSON INC

FACILITY LOCATION

2055 HAMMOND DR  
SCHAUMBURG

IL 60193

PROCESS CODE

S01

DESIGN CAPACITY

~~55.00000~~

6600

UNIT OF MEASURE

G

-----\*\*KEY\*\*-----

PROCESS	PRO- CESS CODE	APPROPRIATE UNITS OF MEASURE	* UNIT OF MEASURE	CODE
STORAGE:			* GALLONS	G
			* LITERS	L
CONTAINER	S01	G OR L	* CUBIC YARDS	Y
TANK	S02	G OR L	* CUBIC METERS	C
WASTE PILE	S03	Y OR C	* GALLONS PER DAY	U
SURFACE IMPOUNDMENT	S04	G OR L	* LITERS PER DAY	V
DISPOSAL:			* TONS PER HOUR	D
			* METRIC TONS\HOUR	W
INJECTION WELL	D79	G,L,U, OR V	* GALLONS\HOUR	E
LANDFILL	D80	A OR F	* LITERS\HOUR	H
LAND APPLICATION	D81	B OR Q	* ACRE-FEET	A
OCEAN DISPOSAL	D82	U OR V	* HECTARE-METER	F
SURFACE IMPOUNDMENT	D83	G OR L	* ACRES	B
TREATMENT:			* HECTARES	Q
			* POUNDS\HOUR	J
TANK	T01	U OR V	* KILOGRAMS\HOUR	R
SURFACE IMPOUNDMENT	T02	U OR V	* TONS PER DAY	N
INCINERATOR	T03	D,W,E, OR H	* METRIC TONS\DAY	S
OTHER	T04	J,R,N,S,U,V	*	





Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (*Section 3010 of the Resource Conservation and Recovery Act*).

## Notification of Hazardous Waste Activity

**For Official Use Only**

[illegible]

Date Received  
(yr. mo. day)

[illegible]

### I. Name of Installation

V A N       W A T E R S       &       R O G E R S - S C H A U M B U R G

## II. Installation Mailing Address

[illegible]

City or Town

State

ZIP Code

C	S	C	H	A	U	M	B	U	R	G										I	L	6	0	1	9	5
---	---	---	---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	---	---	---	---	---	---	---

### III. Location of Installation

Street or Route Number

[illegible]

City or Town

State

ZIP Code

[illegible]

#### IV. Installation Contact

Name and Title (last, first, and job title)

Phone Number (area code and number)

[illegible]

## V. Ownership

A. Name of Installation's Legal Owner

B. Type of Ownership (enter code)

[illegible]**VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)**

### A. Hazardous Waste Activity

☒ 1a. Generator ☐ 1b. Less than 1,000 kg/mo.

☒ 2. Transporter

☐ 3. Treater/Storer/Disposer

☐ 4. Underground Injection

☐ 5. Market or Burn Hazardous Waste Fuel  
(enter "X" and mark appropriate boxes below)

☐ a. Generator Marketing to Burner

☐ b. Other Marketer

☐ c. Burner

## B. Used Oil Fuel Activities

☐ 6. Off-Specification Used Oil Fuel  
(enter 'X' and mark appropriate boxes below)

☐ a. Generator Marketing to Burner

☐ b. Other Marketer

☐ c. Burner

☐ 7. Specification Used Oil Fuel Marketer (or On-site Burner)  
Who First Claims the Oil Meets the Specification

**VII. Waste Fuel Burning: Type of Combustion Device** (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

☐ A. Utility Boiler      ☐ B. Industrial Boiler      ☐ C. Industrial Furnace

**VIII. Mode of Transportation** *(transporters only — enter 'X' in the appropriate box(es))*

☐ A. Air    ☐ B. Rail    ☒ C. Highway    ☐ D. Water    ☐ E. Other (specify)

### IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

☐ A. First Notification      ☒ B. Subsequent Notification (*complete item C*)

C. Installation's EPA ID Number

I	L	D	0	0	0	8	1	9	9	3
---	---	---	---	---	---	---	---	---	---	---



ID — For Official Use Only													
C	I	L	D	0	0	0	8	1	9	9	3	8	T/A C
W													1

## X. Description of Hazardous Wastes (continued from front)

**A. Hazardous Wastes from Nonspecific Sources.** Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1 F 0 0 1	2 F 0 0 2	3 F 0 0 3	4 F 0 0 5	5	6
7	8	9	10	11	12

**B. Hazardous Wastes from Specific Sources.** Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

**C. Commercial Chemical Product Hazardous Wastes.** Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

**D. Listed Infectious Wastes.** Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
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**E. Characteristics of Nonlisted Hazardous Wastes.** Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☒ 1. Ignitable  
(D001)

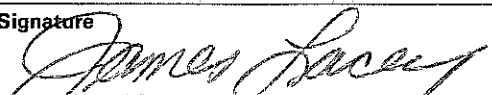
☐ 2. Corrosive  
(D002)

☐ 3. Reactive  
(D003)

☐ 4. Toxic  
(D000)

## XI. Certification

*I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.*

Signature 	Name and Official Title (type or print) James F. Lacey Regional Vice President, Central Reg	Date Signed 6/04/87
--	---	------------------------



United States Environmental Protection Agency  
Washington, DC 20460  
**Notification of Hazardous Waste Activity**Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).**For Official Use Only**

Comments

C

C

Installation's EPA ID Number

Approved

Date Received

(yr. mo. day)

C

T/A C

F

1

**I. Name of Installation**

V A N W A T E R S &amp; R O G E R S - S C H A U M B U R G

**II. Installation Mailing Address**

Street or P.O. Box

C

3

2 0 5 5 H A M M O N D D R I V E

City or Town

State

ZIP Code

C

4

S C H A U M B U R G I L 6 0 1 9 5

**III. Location of Installation**

Street or Route Number

C

5

2 0 5 5 H A M M O N D D R I V E

City or Town

State

ZIP Code

C

6

S C H A U M B U R G I L 6 0 1 9 5

**IV. Installation Contact**

Name and Title (last, first, and job title)

Phone Number (area code and number)

C

2

A U S T I N S A R A H M G R . 3 1 2 3 9 7 2 7 1 5

**V. Ownership**

A. Name of Installation's Legal Owner

B. Type of Ownership (enter code)

C

R

V A N W A T E R S &amp; R O G E R S , I N C . P

**VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)****A. Hazardous Waste Activity****B. Used Oil Fuel Activities**

- ☒ 1a. Generator ☐ 1b. Less than 1,000 kg/mo.  
☒ 2. Transporter  
☐ 3. Treater/Storer/Disposer  
☐ 4. Underground Injection  
☐ 5. Market or Burn Hazardous Waste Fuel  
(enter 'X' and mark appropriate boxes below)  
☐ a. Generator Marketing to Burner  
☐ b. Other Marketer  
☐ c. Burner

- ☐ 6. Off-Specification Used Oil Fuel  
(enter 'X' and mark appropriate boxes below)  
☐ a. Generator Marketing to Burner  
☐ b. Other Marketer  
☐ c. Burner  
☐ 7. Specification Used Oil Fuel Marketer (or On-site Burner)  
Who First Claims the Oil Meets the Specification

**VII. Waste Fuel Burning: Type of Combustion Device** (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

- ☐ A. Utility Boiler ☐ B. Industrial Boiler ☐ C. Industrial Furnace

**VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))**

- ☐ A. Air ☐ B. Rail ☒ C. Highway ☐ D. Water ☐ E. Other (specify)

**IX. First or Subsequent Notification**

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

- ☐ A. First Notification ☒ B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

I L D 0 0 0 8 1 9 9 3 8







ID — For Official Use Only														
C	I	L	D	0	0	0	8	1	9	9	3	8	T/A	C
W														1

# X. Description of Hazardous Wastes (continued from front)

**A. Hazardous Wastes from Nonspecific Sources.** Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
F 0 0 1	F 0 0 2	F 0 0 3	F 0 0 5	D 0 0 1	
7	8	9	10	11	12

**B. Hazardous Wastes from Specific Sources.** Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

**C. Commercial Chemical Product Hazardous Wastes.** Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

**D. Listed Infectious Wastes.** Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

**E. Characteristics of Nonlisted Hazardous Wastes.** Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☒ 1. Ignitable  
(D001)

☐ 2. Corrosive  
(D002)

☐ 3. Reactive  
(D003)

☐ 4. Toxic  
(D000)

## XI. Certification

*I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.*

Signature <i>James W. Bernard</i>	Name and Official Title (type or print) James W. Bernard, Vice President	Date Signed October 31, 1986
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RECEIVED

JUN 18 1987

US EPA REGION IV







**Van Waters & Rogers Inc.**  
subsidiary of **Univar**

600 Hunter Drive  
Oak Brook, IL 60521  
Phone 312-573-4300

June 8, 1987

U. S. EPA, Region V  
Waste Management Division  
Illinois Desk  
P.O. Box A-3587  
Chicago, IL 60690

RE: Van Waters & Rogers, Inc.  
Schaumburg, Illinois  
ILD 000 819 938

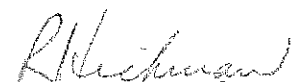
Gentlemen:

Attached is a Subsequent Notification of Hazardous Waste Activity for above referenced facility.

This notification is submitted due to a change in installation contact because of a management change. Please revise your records accordingly.

Very truly yours,

VAN WATERS & ROGERS, INC.



Robert D. Hickman  
Regional Regulatory Manager

RDH:be

Attachment

COPIES TO: T. E. Nisler  
J. J. Pesek  
File







SEP 30 1986

Please print or type with ELITE type (12 character (1 inch) in the unshaded areas only

Approved. OMB No. 2050-0028. Expires 9-30-88  
GSA No. 0246-EPA-OTUnited States Environmental Protection Agency  
Washington, DC 20460

## Notification of Hazardous Waste Activity

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

## For Official Use Only

Comments

RECEIVED

SEP 26 1986

Installation's EPA ID Number

Approved

Date Received  
(yr. mo. day)

T/A C

1

## I. Name of Installation

V A N W A T E R S &amp; R O G E R S

## II. Installation Mailing Address

Street or P.O. Box

2 0 5 5 H a m m o n d D r

City or Town

State

ZIP Code

S c h a u m b u r g

I L

6 0 1 9 5

## III. Location of Installation

Street or Route Number

2 0 5 5 H a m m o n d D r

City or Town

State

ZIP Code

S c h a u m b u r g

I L

6 0 1 9 5

## IV. Installation Contact

Name and Title (last, first, and job title)

Phone Number (area code and number)

A u s t i n S a r a h M g r .

3 1 2 3 9 7 2 7 1 5

## V. Ownership

A. Name of Installation's Legal Owner

B. Type of Ownership (enter code)

D S W, I N C. To be a subsidiary of Univac Corp.

P

## VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

## A. Hazardous Waste Activity

## B. Used Oil Fuel Activities

- ☒ 1a. Generator ☐ 1b. Less than 1,000 kg/mo.  
☒ 2. Transporter  
☒ 3. Treater/Storer/Disposer  
☐ 4. Underground Injection  
☐ 5. Market or Burn Hazardous Waste Fuel  
     (enter 'X' and mark appropriate boxes below)  
     ☐ a. Generator Marketing to Burner  
     ☐ b. Other Marketer  
     ☐ c. Burner

- ☐ 6. Off-Specification Used Oil Fuel  
     (enter 'X' and mark appropriate boxes below)  
     ☐ a. Generator Marketing to Burner  
     ☐ b. Other Marketer  
     ☐ c. Burner  
☐ 7. Specification Used Oil Fuel Marketer (or On site Burner)  
     Who First Claims the Oil Meets the Specification

## VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

☐ A. Utility Boiler☐ B. Industrial Boiler☐ C. Industrial Furnace

## VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))

☐ A. Air ☐ B. Rail ☒ C. Highway ☐ D. Water ☐ E. Other (specify)

## IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

☐ A. First Notification ☒ B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

I L D 0 0 0 8 1 9 9 3 8



ID — For Official Use Only													
C												T/A	C
W													1

# X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

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43	44	45	46	47	48

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----	----	----	----	----	----

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☐ 1. Ignitable  
(D001)

☐ 2. Corrosive  
(D002)

☐ 3. Reactive  
(D003)

☐ 4. Toxic  
(D000)

## XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature

*Mark Hooper*

Name and Official Title (type or print)

MARK HOOPER, PRESIDENT

Date Signed

SEPT. 22, 1986

RECEIVED

SEP 30 1986

RECEIVED

SEP 26 1986

EPA-DLFC



87-803



**For Official Use Only**

### Comments

[illegible]

1. Name of Installation

V A N W A T E R S & R O G E R S

## II. Installation Mailing Address

Street or P.O. Box

[illegible]

### III. Location of Installation

Street or Route Number

[illegible]

#### IV. Installation Contact

Name and Title (last, first, and job title)

Phone Number (area code and number)

C	A	u	s	t	i	n		S	a	r	a	h		M	g	r.				3	1	2	3	9	7	2	7	1	5
---	---	---	---	---	---	---	--	---	---	---	---	---	--	---	---	----	--	--	--	---	---	---	---	---	---	---	---	---	---

### V. Ownership

**A. Name of Installation's Legal Owner**

8. Type of Ownership (enter code)

C	D	S	W	I	N	C.				To be a subsidiary of				P
R										Univar Corp.				

VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity		B. Used Oil Fuel Activities	
<input checked="" type="checkbox"/> 1a. Generator	<input type="checkbox"/> 1b. Less than 1,000 kg/mo.	<input type="checkbox"/> 6. Off-Specification Used Oil Fuel (enter 'X' and mark appropriate boxes below)	
<input checked="" type="checkbox"/> 2. Transporter		<input type="checkbox"/> a. Generator Marketing to Burner	
<input checked="" type="checkbox"/> 3. Treater/Storer/Disposer		<input type="checkbox"/> b. Other Marketer	05.09
<input type="checkbox"/> 4. Underground Injection		<input type="checkbox"/> c. Burner	
<input type="checkbox"/> 5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below)		<input type="checkbox"/> 7. Specification Used Oil Fuel Marketer (or On site Burner) Who First Claims the Oil Meets the Specification	
<input type="checkbox"/> a. Generator Marketing to Burner			
<input type="checkbox"/> b. Other Marketer			
<input type="checkbox"/> c. Burner			

**VII. Waste Fuel Burning: Type of Combustion Device** (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

☐ A. Utility Boiler      ☐ B. Industrial Boiler      ☐ C. Industrial Furnace

**VIII. Mode of Transportation** (transporters only — enter 'X' in the appropriate box(es))

☐ A. Air    ☐ B. Rail    ☒ C. Highway    ☐ D. Water    ☐ E. Other (specify)

### **IX. First or Subsequent Notification**

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

☐ A. First Notification    ☒ B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number									
I	L	D	0	0	0	8	1	9	3



ID — For Official Use Only													
C												T/A	C
W													1

# X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
F 0 0 1	F 0 0 3	F 0 0 5			
7	8	9	10	11	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☐ 1. Ignitable  
(D001)


☐ 2. Corrosive  
(D002)

☐ 3. Reactive  
(D003)

☐ 4. Toxic  
(D000)

## XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature 	Name and Official Title (type or print) MARK HOOPER, PRESIDENT	Date Signed SEPT. 22, 1986
--	---	-------------------------------

RECEIVED

SEP 30 1986

RECEIVED

SEP 26 1986

EPA-DLFC





**ACKNOWLEDGEMENT OF NOTIFICATION  
OF HAZARDOUS WASTE ACTIVITY  
(VERIFICATION)**

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

• ILD000819938 REACKNOWLEDGEMENT

INSTALLATION ADDRESS

MCKESSON CHEMICAL COMPANY  
2055 HAMMOND DR  
SCHAUMBURG IL 60193  
  
2055 HAMMOND DR  
SCHAUMBURG IL 60193



Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

### Comments

Continue on reverse



ID - For Official Use Only														
C	I	L	D	0	0	0	8	1	9	9	3	8	T/A	C
W														1

# X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
F 0 0 1	F 0 0 2	F 0 0 3	F 0 0 5	D 0 0 1	
7	8	9	10	11	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24)

☒ 1. Ignitable  
(D001)

☐ 2. Corrosive  
(D002)

☐ 3. Reactive  
(D003)

☐ 4. Toxic  
(D000)

# XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature

*James W. Bernard*

Name and Official Title (type or print)

James W. Bernard, Vice President

Date Signed

October 31, 1986

RECEIVED

NOV - 5 1986

EPA-DLPC

NOV - 3 1986

EPA-DLPC







ID — For Official Use Only													
C	I	L	D	0	0	0	8	1	9	9	3	8	T/A
W													C
													1

# X. Description of Hazardous Wastes (continued from front)

**A. Hazardous Wastes from Nonspecific Sources.** Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
F 0 0 1	F 0 0 2	F 0 0 3	F 0 0 5	D 0 0 1	
7	8	9	10	11	12

**B. Hazardous Wastes from Specific Sources.** Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

**C. Commercial Chemical Product Hazardous Wastes.** Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

**D. Listed Infectious Wastes.** Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

**E. Characteristics of Nonlisted Hazardous Wastes.** Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☒ 1. Ignitable  
(D001)

☐ 2. Corrosive  
(D002)

☐ 3. Reactive  
(D003)

☐ 4. Toxic  
(D000)

# XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature <i>James W. Bernard</i>	Name and Official Title (type or print) James W. Bernard, Vice President	Date Signed October 31, 1986
--------------------------------------	---	---------------------------------

RECEIVED  
NOV - 5 1986  
EPA-DLPC  
NOV - 3 1986  
EPA-DLPC







A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 – 261.24.)

☐ 4. TOXIC  
(D000)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

DATE SIGNED

11-10-80



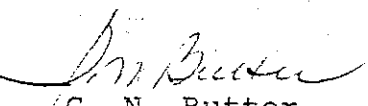
McKesson Chemical Company

Foremost-McKesson  
Chemical Group  
One Post Street  
San Francisco, CA 94104  
415 983 8300



To Whom It May Concern:

McKesson Chemical Company, which is an operating division of Foremost McKesson, Inc., is a distributor of various chemical products for various suppliers of chemicals. It operates a large number of distribution facilities throughout the country, of which this is one. We stock an average of five-hundred (500) packaged chemical products at these locations. The products carried will vary from location to location and from time to time. It is anticipated that some or all of the products could at one time or another result in the generation of a hazardous waste and the amount generated could in one or more instances exceed the quantity limit for a small generator. Since ours is a distributing function it is impossible for us to be more specific at this time.

  
G. N. Butter  
Technical Director  
McKesson Chemical Company

GNB:ks  
attachment (Form GSA No. 0246-EPA-OT)



November 20, 1980



EPA Region V  
RCRA Activities  
P O BOX 7861  
Chicago, IL 60680

Re: McKesson Chemical Company's Listing for  
RCRA OMB #158-S79016

Gentlemen:

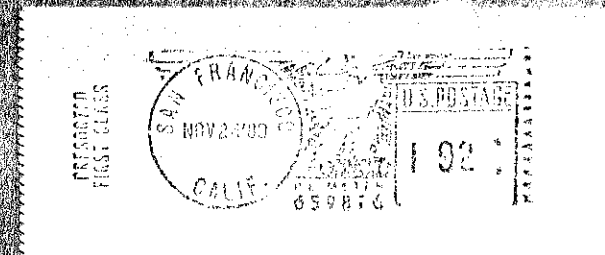
On or prior to August 18, 1980, we filed with your office a Notification of Hazardous Waste Activity for our facilities at Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin Branches.

In that Notification, we advised that the facility would act as a transporter and or generator of hazardous waste.

We are primarily distributors of industrial chemicals for various chemical producers throughout the country. As an accommodation to our customers it is our intent to, from time to time, pick up several drums of material from our customer's facility that would fit the classification of a hazardous waste. We would transport this material to a recycler for recycling, not for disposal. Because of the distance this material must be transported, it would be necessary at times to store some of these drums on our facility for short periods to enable us to accumulate sufficient drums to make the transport economic.

We are informed that even though as a generator of hazardous waste we would be authorized to store our own waste for up to 90 days without requiring a permit, the storage of similar material belonging to our customers, in the course of transporting it to a recycler, would constitute our facility a hazardous waste management (storage) facility, for which a permit would be required.



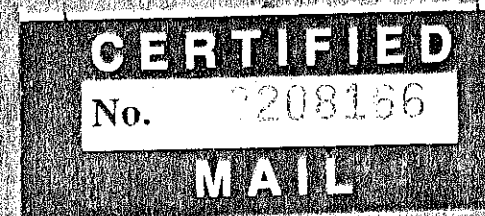


*Foremost-McKesson, Inc.*

Crocker Plaza • One Post Street • San Francisco, CA 94104

Return Requested

TO EPA REGION V  
RCRA Activities  
P O BOX 7861  
Chicago, IL 60680  
Attn: Y.J. Kim



**RETURN RECEIPT  
REQUESTED**



Please print or type with ELITE type (12 characters/inch) in the unshaded areas only.

Form Approved OMB No. 158-S79016  
GSA No. 0246-EPA-OT



U.S. ENVIRONMENTAL PROTECTION AGENCY  
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTALLATION'S EPA I.D. NO.

I. NAME OF INSTALLATION

II. INSTALLATION MAILING ADDRESS

III. LOCATION OF INSTALLATION

PLEASE PLACE LABEL IN THIS SPACE

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

FOR OFFICIAL USE ONLY

COMMENTS

C

15 16

55

INSTALLATION'S EPA I.D. NUMBER

APPROVED

DATE RECEIVED (yr., mo., & day)

5 15 16 17 18 19 20 21 22

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22

15 16 17 18 19 20 21 22

I. NAME OF INSTALLATION

Mckesson Chemical Company

30 67

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

3 2055 Hammond Drive

5 16 45

CITY OR TOWN

4 Schaumburg

15 16 40 41 42 47 51

ST. ZIP CODE

IL 60195

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

5 2055 Hammond Drive

15 16 45

CITY OR TOWN

6 Schaumburg

15 16 40 41 42 47 51

ST. ZIP CODE

IL 60195

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

PHONE NO. (area code & no.)

2 Morgan James E F Manager

15 16 45 46 47 48 49 50 51 52 53 54 55

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

8 Foremost McKesson Inc.

15 16 55

B. TYPE OF OWNERSHIP (enter the appropriate letter into box)

F = FEDERAL  
M = NON-FEDERAL

M

56

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

☒ A. GENERATION  
☐ B. TRANSPORTATION (complete item VII)  
☐ C. TREAT/STORE/DISPOSE  
☐ D. UNDERGROUND INJECTION

57 58 59 60

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐ A. AIR  
☐ B. RAIL  
☒ C. HIGHWAY  
☐ D. WATER  
☐ E. OTHER (specify):

61 62 63 64 65

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

AUG 18 1980

☒ A. FIRST NOTIFICATION  
☐ B. SUBSEQUENT NOTIFICATION (complete item C)

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

C. INSTALLATION'S EPA I.D. NO.

140000819938



I.D. - FOR OFFICIAL USE ONLY

S	W	1	4	0	0	0	8	1	9	9	3	8	7/A	C
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

**IX. DESCRIPTION OF HAZARDOUS WASTES** (continued from front)

**A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES.** Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1 F 0 0 1 23 - 26	2 F 0 0 3 23 - 26	3 F 0 0 5 23 - 26	4 23 - 26	5 23 - 26	6 23 - 26
7 23 - 26	8 23 - 26	9 23 - 26	10 23 - 26	11 23 - 26	12 23 - 26

**B. HAZARDOUS WASTES FROM SPECIFIC SOURCES.** Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13 23 - 26	14 23 - 26	15 23 - 26	16 23 - 26	17 23 - 26	18 23 - 26
19 23 - 26	20 23 - 26	21 23 - 26	22 23 - 26	23 23 - 26	24 23 - 26
25 23 - 26	26 23 - 26	27 23 - 26	28 23 - 26	29 23 - 26	30 23 - 26

**C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES.** Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary. See attachment.

31 23 - 26	32 23 - 26	33 23 - 26	34 23 - 26	35 23 - 26	36 23 - 26
37 23 - 26	38 23 - 26	39 23 - 26	40 23 - 26	41 23 - 26	42 23 - 26
43 23 - 26	44 23 - 26	45 23 - 26	46 23 - 26	47 23 - 26	48 23 - 26

**D. LISTED INFECTIOUS WASTES.** Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49 23 - 26	50 23 - 26	51 23 - 26	52 23 - 26	53 23 - 26	54 23 - 26
---------------	---------------	---------------	---------------	---------------	---------------

**E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES.** Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☐ 1. IGNITABLE  
(D001)

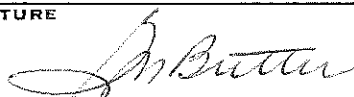
☐ 2. CORROSIVE  
(D002)

☐ 3. REACTIVE  
(D003)

☐ 4. TOXIC  
(D000)
**X. CERTIFICATION**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE



NAME &amp; OFFICIAL TITLE (type or print)

G. N. Butter, Technical Director  
McKesson Chemical Company

DATE SIGNED

8-14-80



November 18, 1980

ILD000819938

EPA Region 5  
Solid Waste Program  
230 South Dearborn Street  
Chicago, Illinois 60604



Dear Sir:

On or prior to August 18, 1980, we filed with your office a Notification of Hazardous Waste Activity for our facility at 2055 Hammond Drive, Schaumburg, Ill 60193 (no number received).

In that Notification we advised that the facility would act as a generator and transporter of hazardous waste.

We are primarily distributors of industrial chemicals for various chemical producers throughout the country. As an accomodation to our customers it is our intent to, from time to time, pick up limited quantities of material in drums from our customer's facility that would fit the classification of a hazardous waste. We would transport this material to a recycler for recycling, not for disposal. Because of the distance this material must be transported to the recycler, it would be necessary at times to store some of these drums on our facility for short periods to enable us to accumulate sufficient drums to make the transport economic.

We are informed that even though as a generator of hazardous waste we would be authorized to store our own waste for up to 90 days without requiring a permit, the storage of similar material belonging to our customers, in the course of transporting it to a recycler, would constitute our facility a hazardous waste management (storage) facility, for which a permit would be required.

Since we believe that what we propose would be a sound and responsible hazardous waste management activity, we would request the opportunity to do this. We are also advised that this requires an amendment of the Notification and Part A permit application. We respectfully ask that this letter be accepted as an amendment to our Notification and Hazardous Waste Permit Application which have been previously filed with you.

(Continued)



Page Two

We would ask acknowledgement of your acceptance of this amendment. For your convenience, we enclose a copy of this letter on which your acknowledgement can be noted, and a stamped, self-addressed envelope with which it may be returned to us. Thank you for your very kind cooperation.

Respectfully,

*M.A. Minor*

M. A. Minor  
Regional Vice President

Enclosure

ACCEPTED:

Environmental Protection Agency  
Region \_\_\_\_\_

By: \_\_\_\_\_



McKesson Chemical Company


Foremost-McKesson  
Chemical Group  
One Post Street  
San Francisco, CA 94104  
415 983 8300

FOREMOST  
McKESSON

To Whom It May Concern:

McKesson Chemical Company, which is an operating division of Foremost-McKesson, Inc., is a distributor of various chemical products for various suppliers of chemicals. It operates a large number of distribution facilities throughout the country, of which this is one. We stock an average of five-hundred (500) packaged chemical products at these locations. The products carried will vary from location to location and from time to time. It is anticipated that some or all of the products could at one time or another result in the generation of a hazardous waste and the amount generated could in one or more instances exceed the quantity limit for a small generator. Since ours is a distributing function it is impossible for us to be more specific at this time.

In addition, this particular unit is a repackager of certain chemical products which is expected to result in the generation of hazardous wastes. This is more particularly spelled out in the Notification submitted herewith.

  
G. N. Butter  
Technical Director  
McKesson Chemical Company

GNB:ks  
attachment (Form GSA No. 0246-EPA-OT)

AUG 18 1980



# Van Waters & Rogers Inc.

subsidiary of **Univar**

600 HUNTER DRIVE  
OAK BROOK, IL 60521  
PHONE (708) 573-4300

CERTIFIED MAIL #P472-960-463  
RETURN RECEIPT REQUESTED

September 21, 1990

U.S. Environmental Protection Agency - Region V  
RCRA Activities  
Waste Management Division  
P.O. Box A3587  
Chicago, Illinois 60690

RECEIVED

SEP 25 1990

U. S. EPA, REGION V  
SWB - PMS

RE: Van Waters & Rogers Inc.  
2055 Hammond Drive  
Schaumburg, Illinois 60173  
ILD 000 819 938

RCRA Interim Status Facility  
Amendment to Part A application to describe newly listed  
characteristic waste codes pursuant to 40 CFR Part 261 and the  
Final Rule appearing March 29, 1990 in the Federal Register  
at 55 FR 11798

Dear RCRA Activities:

The Van Waters & Rogers Inc. (VW&R) location referenced above has RCRA interim status. Enclosed is an amended Part A application for this VW&R facility. VW&R is a RCRA intermediate drum storage facility only and does not engage in RCRA treatment, recycling or disposal activities. Hazardous waste stored at this VW&R location is ultimately transported to a properly licensed and permitted RCRA TSD facility for treatment, recycling or disposal as soon after arrival at VW&R as is reasonably practicable.

This amended Part A is submitted in accordance with 40 CFR Part 270.72(a)(1) to describe characteristic hazardous wastes newly identified by the U.S. Environmental Protection Agency. These newly identified waste codes are incorporated into 40 CFR Part 261 effective September 25, 1990, as announced in the Federal Register on March 29, 1990 at 55 FR 11798.

VW&R is amending its Part A to provide for storage in containers in route for proper treatment or disposal of the following newly identified secondary characteristics of hazardous wastes: D018, D021, D022, D023, D024, D025, D026, D027, D028, D029, D030, D032, D033, D034, D035, D036, D037, D038, D039, and D040.

C233-T



U.S. EPA - Region V  
September 21, 1990  
Page 2

VW&R is submitting this amendment using EPA Form 8700-23. We are enclosing only items I through IX, XIV.A, XVIII, and XIX of this form. The Part A currently on file with your office and the appropriate State regulatory agency is not being amended in any other respect at this time. The waste codes listed above and appearing in item XIV of the attached Part A are in addition to the waste codes already listed in the Part A currently on file with your office.

This amended Part A will not in any way alter VW&R's process of intermediate storage in drums at this facility. This amendment is submitted only for the purpose of confirming VW&R's authority to store newly identified TCLP secondary waste streams in drums at its present interim status storage unit.

Any questions concerning this correspondence should be directed to James Hooper (708-573-4340) or in writing to the letterhead address.

Very truly yours,

VAN WATERS & ROGERS INC.



James P. Hooper  
Regulatory Manager  
Northern Region

JPH:be

Enclosure

Copies to:

Mr. Lawrence Eastep, P.E., Manager  
Land Pollution Control Division  
Illinois EPA  
P.O. Box 19276  
Springfield, Illinois 62794-9276

R.D. Hickman, NRO  
Branch Operations Manager  
File

bcc:

S. Schmid, Univar  
J. Cichowicz, Univar  
T. Nisler, Univar



For EPA Regional Use Only		EPA United States Environmental Protection Agency Washington, DC 20460		For State Use Only	
Date Received Month Day Year		<b>Hazardous Waste Permit Application</b>			
		<b>Part A</b>			
I. ID Number(s)					
A. EPA ID Number		B. Secondary ID Number (if applicable)			
I L D 0 0 0 8 1 9 9 3 8					
II. Name of Facility					
V A N W A T E R S I R O G E R S I N C					
III. Facility Location (Physical address, not P.O. Box or Route Number)					
A. Street					
2 0 5 5 H A M M O N D D R					
Street (continued)					
City or Town				State	ZIP Code
S C H A U M B U R G				I L	6 0 1 7 3 - 3 8 0 9
County Code (if known)		County Name			
		C O O K			
B. Land Type (enter code)		C. Geographic Location LATITUDE (degrees, minutes, & seconds)		D. Facility Existence Date Month Day Year	
P		4 2 0 4 0 0 9 0 8 8 0 2 1 8 3			
IV. Facility Mailing Address					
Street or P.O. Box					
2 0 5 5 H A M M O N D D R					
City or Town				State	ZIP Code
S C H A U M B U R G				I L	6 0 1 7 3 - 3 8 0 9
V. Facility Contact (Person to be contacted regarding waste activities at facility)					
Name (last)			(first)		
S I E V E R S			D E A N		
Job Title			Phone Number (area code and number)		
A R E A M A N A G E R			7 0 8 - 3 0 3 - 0 0 5 0		
VI. Facility Contact Address (See Instructions)					
A. Contact Address Location Mailing		B. Street or P.O. Box			
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>					
City or Town				State	ZIP Code

U. S. EPA, REGION V  
SWB - PMS



EPA Form 8700-23 (01-90)



EPA ID Number (enter from page 1)

Secondary ID Number (enter from page 1)

21. Nature of Business (provide a brief description)

## XII. Process Codes and Design Capacities

A. **PROCESS CODE**—Enter the code from the list of process codes below that best describes each process to be used at the facility. Twelve lines are provided for entering codes. If more lines are needed, attach a separate sheet of paper with the additional information. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided in item XIII.

B. **PROCESS DESIGN CAPACITY**—For each code entered in column A, enter the capacity of the process.

1. **AMOUNT**—Enter the amount. In a case where design capacity is not applicable (such as in a closure/post-closure or enforcement action) enter the total amount of waste for that process unit.

2. **UNIT OF MEASURE**—For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

C. **PROCESS TOTAL NUMBER OF UNITS**—Enter the total number of units used with the corresponding process code.

PROCESS CODE	PROCESS	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	UNIT OF MEASURE	UNIT OF MEASURE CODE
D79	<b>DISPOSAL:</b> INJECTION WELL	GALLONS; LITERS; GALLONS PER DAY; OR LITERS PER DAY	GALLONS .....	G
D80	LANDFILL	ACRE-FEET OR HECTARE-METER	GALLONS PER HOUR .....	E
D81	LAND APPLICATION	ACRES OR HECTARES	GALLONS PER DAY .....	U
D82	OCEAN DISPOSAL	GALLONS PER DAY OR LITERS PER DAY	LITERS .....	L
D83	SURFACE IMPOUNDMENT	GALLONS OR LITERS	LITERS PER HOUR .....	H
S01	<b>STORAGE:</b> CONTAINER	GALLONS OR LITERS	LITERS PER DAY .....	V
S02	(barrel, drum, etc.)		SHORT TONS PER HOUR .....	D
S03	TANK	GALLONS OR LITERS	METRIC TONS PER HOUR .....	W
S04	WASTE PILE	CUBIC YARDS OR CUBIC METERS	SHORT TONS PER DAY .....	N
S04	SURFACE IMPOUNDMENT	GALLONS OR LITERS	METRIC TONS PER DAY .....	S
T01	<b>TREATMENT:</b> TANK	GALLONS PER DAY OR LITERS PER DAY	POUNDS PER HOUR .....	J
T02	SURFACE IMPOUNDMENT	GALLONS PER DAY OR LITERS PER DAY	KILOGRAMS PER HOUR .....	R
T03	INCINERATOR	SHORT TONS PER HOUR; METRIC TONS PER HOUR; GALLONS PER HOUR; LITERS PER HOUR; OR BTU'S PER HOUR	CUBIC YARDS .....	Y
T04	<b>OTHER TREATMENT</b> <small>(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundment or incinerators. Describe the processes in the space provided in item XIII.)</small>	GALLONS PER DAY; LITERS PER DAY; POUNDS PER HOUR; SHORT TONS PER HOUR; KILOGRAMS PER HOUR; METRIC TONS PER DAY; METRIC TONS PER HOUR; OR SHORT TONS PER DAY	CUBIC METERS .....	C
			ACRES .....	B
			ACRE-FEET .....	A
			HECTARES .....	Q
			HECTARE-METER .....	F
			BTU's PER HOUR .....	K



EPA I.D. Number (enter from page 1)	Secondary ID Number (enter from page 1)
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**XII Process Codes and Design Capacities (continued)**

EXAMPLE FOR COMPLETING ITEM XII (shown in line number 1): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

Line Number	A. PROCESS CODE (from II above)				B. PROCESS DESIGN CAPACITY		C. PROCESS TOTAL NUMBER OF UNITS			D. FOR OFFICIAL USE ONLY			
	1	2	3	4	1. AMOUNT (specify)	2. UNIT OF MEASURE (enter code)	1	2	3	1	2	3	4
1					200								
2					400								
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													

NOTE: If you need to list more than 12 process codes, attach an additional sheet(s) with the information in the same format as above. Number the lines sequentially, taking into account any lines that will be used for additional treatment processes in Item XIII.

**XIII Additional Treatment Processes (follow instructions from Item XII)**

Line Number (enter numbers in sequence with Item XII)	A. PROCESS CODE				B. TREATMENT PROCESS DESIGN CAPACITY		C. PROCESS TOTAL NUMBER OF UNITS	D. DESCRIPTION OF PROCESS			
	1	2	3	4	1. AMOUNT (specify)	2. UNIT OF MEASURE (enter code)					
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											



EPA ID Number (enter from page 1)

Secondary ID Number (enter from page 1)

**XIV. Description of Hazardous Wastes**

**EPA HAZARDOUS WASTE NUMBER:** Enter the code designating the waste from EPA Part 261 Subpart D of each listed hazardous waste. For non-listed hazardous waste, enter the code designating the waste from EPA Part 261 Subpart D of each listed hazardous waste. Enter the code designating the waste from EPA Part 261 Subpart D of each listed hazardous waste.

**ESTIMATED ANNUAL QUANTITY:** Enter the estimated annual quantity of the waste that will be handled or stored at the facility. For non-listed hazardous waste, estimate the total annual quantity of the waste that will be handled or stored at the facility.

**UNIT OF MEASURE:** Enter the unit of measure for the waste. For listed hazardous waste, enter the unit of measure for the waste. For non-listed hazardous waste, enter the unit of measure for the waste.

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

**D. PROCESSES****1. PROCESS CODES**

For listed hazardous waste: For each listed hazardous waste entered in column A, select the code(s) from the list of process codes contained in Item XIV-A on page 3 to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous waste: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item XIV-A on page 3 to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that processes that characteristic or toxic contaminant.

**NOTE: THREE SPACES ARE PROVIDED FOR ENTERING PROCESS CODES. IF MORE ARE NEEDED:**

- Enter the first two as described above.
- Enter "000" in the extreme right box of Item XIV-D(1).
- Enter in the space provided on page 7, Item XIV-E, the line number and the additional code(s).

**2. PROCESS DESCRIPTION:** If a code is not listed for a process that will be used, describe the process in the space provided on the form (D.2)).

**NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER:** Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

- Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
- In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "Included with above" and make no other entries on that line.
- Repeat step 2 for each EPA Hazardous Waste Number that can be used to describe the hazardous waste.

**EXAMPLE FOR COMPLETING ITEM XIV (shown in line numbers X-1, X-2, X-3, and X-4 below):** A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

Line Number	A. EPA HAZARD WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESS										
				(1) PROCESS CODES (enter)					(2) PROCESS DESCRIPTION (If a code is not entered in D(1))					
X-1	K 0 5 4	900	P	T	0	3	D	8	0					
X-2	D 0 0 2	400	P	T	0	3	D	8	0					
X-3	D 0 0 1	100	P	T	0	3	D	8	0					
X-4	D 0 0 2												Included With Above	



[illegible]

## XIV. Description of Hazardous Wastes (continued)

[illegible]







**Van Waters & Rogers Inc.**  
subsidiary of **Univar**

600 HUNTER DRIVE  
OAK BROOK, IL 60521  
PHONE (312) 573-4300

July 1, 1987

U. S. EPA, Region V  
230 South Dearborn Street  
Chicago, IL 60604

RE: Van Waters & Rogers, Inc.  
ILD 000 819 938

RECEIVED  
JUL 13 1987  
SOLID WASTE DIVISION  
U.S. EPA, REGION V

C, TR, RSD, PA

Gentlemen:

Attached is a revised General Information Sheet (Form 3510-1) for our  
above referenced facility to reflect a change in the name of the facility  
coordinator.

Please revise your records accordingly.

Very truly yours,

VAN WATERS & ROGERS, INC.

*R. Hickman*  
Robert D. Hickman  
Regional Regulatory Manager

RDH:be

Attachment

COPIES TO: T. E. Nisler  
J. J. Pesek  
File

7/27/87  
Changes were  
sent to Data  
Entry ef



FORM  
**1**  
GENERAL

U.S. ENVIRONMENTAL PROTECTION AGENCY  
**GENERAL INFORMATION**  
Consolidated Permits Program  
(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER  
F I L D 0 0 0 8 1 9 9 3 8

LABEL ITEMS  
I. EPA I.D. NUMBER  
III. FACILITY NAME  
V. FACILITY MAILING ADDRESS  
VI. FACILITY LOCATION

I L D 0 0 0 8 1 9 9 3 8  
Van Waters & Rogers, Inc.  
2055 Hammond Drive  
Schaumburg, IL 60193  
2055 Hammond Drive  
Schaumburg, IL 60193

**GENERAL INSTRUCTIONS**  
If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

JUL 1 1980  
U.S. EPA, REGION 5

II. POLLUTANT CHARACTERISTICS

**INSTRUCTIONS:** Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question; you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X'			SPECIFIC QUESTIONS	MARK 'X'		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X			F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY  
1 SKIP VAN WATERS & ROGERS, INC

IV. FACILITY CONTACT  
A. NAME & TITLE (last, first, & title)  
2 Eckardt John Manager  
B. PHONE (area code & no.)  
3 1 2 3 9 7 2 7 1 5

V. FACILITY MAILING ADDRESS  
A. STREET OR P.O. BOX  
3 2 0 5 5 Hammond Drive  
B. CITY OR TOWN  
4 Schaumburg  
C. STATE  
IL  
D. ZIP CODE  
6 0 1 9 3

VI. FACILITY LOCATION  
A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER  
5 2 0 5 5 Hammond Drive  
B. COUNTY NAME  
Cook  
C. CITY OR TOWN  
6 Schaumburg  
D. STATE  
IL  
E. ZIP CODE  
6 0 1 9 3  
F. COUNTY CODE (if known)  
031



CONTINUED FROM THE FRONT

## VII. SIC CODES (4-digit, in order of priority)

A. FIRST				B. SECOND			
7	5	1	6	7			
(specify) wholesale chemical distributor				(specify)			
C. THIRD				D. FOURTH			
(specify)				(specify)			

## VIII. OPERATOR INFORMATION

A. NAME												B. Is the name listed in Item VIII-A also the owner?					
8 Van Waters & Rogers Inc												<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO					
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)																	
F = FEDERAL				M = PUBLIC (other than federal or state)				D. PHONE (area code & no.)									
S = STATE				O = OTHER (specify)				A 206 447 5909									
P = PRIVATE				P													
E. STREET OR P.O. BOX																	
1600 Norton Building																	
F. CITY OR TOWN												G. STATE		H. ZIP CODE		IX. INDIAN LAND	
B Seattle												WA		98104		Is the facility located on Indian lands?	
																<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

## X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)												D. PSD (Air Emissions from Proposed Sources)											
9 N												9 P											
B. UIC (Underground Injection of Fluids)												E. OTHER (specify)											
9 U												(specify)											
C. RCRA (Hazardous Wastes)												E. OTHER (specify)											
9 R												(specify)											

MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

## XII. NATURE OF BUSINESS (provide a brief description)

As a wholesale chemical distributor, Van Waters & Rogers, Inc. distributes various chemical products. As such, we stock an average of 500 packaged chemicals at this location at any one time. The product list will vary from time to time.

## XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)		B. SIGNATURE		C. DATE SIGNED	
James F. Lacey, Regional Vice President		<i>James F. Lacey</i>		6-29-87	
MENTS FOR OFFICIAL USE ONLY					
C					



FILE COPY

McKesson

RECEIVED

April 7, 1986

Mr. David A. Stringham  
U.S. EPA, Region V  
230 South Dearborn Street  
Chicago, IL 60604

RE: McKesson Chemical Facility  
2055 Hammond Drive  
Schaumburg, IL  
EPA I.D. #ILD000819938

APR 11 1986  
RECEIVED  
SOLID WASTE BRANCH  
U.S. EPA, REGION V  
APR 11 1986  
RECEIVED  
SOLID WASTE BRANCH  
U.S. EPA, REGION V

Dear Mr. Stringham:

Thank you for your letter relating to the possibility of prior or current releases of hazardous wastes or waste constituents at our facility.

Please be advised that, to the best of our knowledge, no such releases from solid waste management units have occurred at this facility. We have no reason to believe that there were any such releases prior to our ownership of this property. A list and description of the solid waste management units at our facility is set forth in our RCRA Part A application.

This response is furnished to you in accordance with our understanding of the provisions contained in Section 3004(u) of RCRA, and we trust it is adequate to respond to your information request. Please do not hesitate to contact the undersigned if you have any questions.

Very truly yours,

McKESSON CHEMICAL COMPANY

*Ronald R. Powell*

Ronald R. Powell  
Regional Vice President

RRP:be

COPIES TO: T. E. Nisler  
File

RECEIVED

APR 16 1986

SWD - AIS  
U.S. EPA, REGION V



<b>FORM 1</b> <b>GENERAL</b>		<b>U.S. ENVIRONMENTAL PROTECTION AGENCY</b> <b>GENERAL INFORMATION</b> <i>Consolidated Permits Program</i> <i>(Read the "General Instructions" before starting.)</i>	<b>I. EPA I.D. NUMBER</b> <div style="border: 1px solid black; padding: 2px;"> <b>F I L D 0 0 0 8 1 9 9 3 8</b> </div>																																																						
<b>II. POLLUTANT CHARACTERISTICS</b> <div style="border: 1px solid black; padding: 5px;"> <p><b>INSTRUCTIONS:</b> Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">SPECIFIC QUESTIONS</th> <th colspan="3">MARK 'X'</th> <th rowspan="2">SPECIFIC QUESTIONS</th> <th colspan="3">MARK 'X'</th> </tr> <tr> <th>YES</th> <th>NO</th> <th>FORM ATTACHED</th> <th>YES</th> <th>NO</th> <th>FORM ATTACHED</th> </tr> </thead> <tbody> <tr> <td>A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)</td> <td></td> <td>XX</td> <td></td> <td>B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)</td> <td></td> <td>X</td> <td></td> </tr> <tr> <td>C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? 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I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		XX		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X																																																			
<b>III. NAME OF FACILITY</b> <div style="border: 1px solid black; padding: 2px;"> <b>1 VAN WATERS &amp; ROGERS - SCHAUMBURG</b> </div>																																																									
<b>IV. FACILITY CONTACT</b> <table style="width:100%;"> <tr> <td style="width:60%;"> <b>A. NAME &amp; TITLE (last, first, &amp; title)</b>  <div style="border: 1px solid black; padding: 2px;"> <b>2 AUSTIN, SARAH MGR.</b> </div> </td> <td style="width:40%;"> <b>B. PHONE (area code &amp; no.)</b>  <div style="border: 1px solid black; padding: 2px;"> <b>3 1 2 3 9 7 2 7 1 5</b> </div> </td> </tr> </table>				<b>A. NAME &amp; TITLE (last, first, &amp; title)</b> <div style="border: 1px solid black; padding: 2px;"> <b>2 AUSTIN, SARAH MGR.</b> </div>	<b>B. PHONE (area code &amp; no.)</b> <div style="border: 1px solid black; padding: 2px;"> <b>3 1 2 3 9 7 2 7 1 5</b> </div>																																																				
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CONTINUED FROM THE FRONT

## VII. SIC CODES (4-digit, in order of priority)

A. FIRST				B. SECOND			
7	5	1	6	7			
(specify) Wholesale Chemical Distributor				(specify)			
C. THIRD				D. FOURTH			
7				7			
(specify)				(specify)			

## VIII. OPERATOR INFORMATION

A. NAME												B. Is the name listed in Item VIII-A also the owner?			
VAN WATERS & ROGERS, INC.												<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)										D. PHONE (area code & no.)					
F - FEDERAL		M - PUBLIC (other than federal or state)		P - PRIVATE		Q - OTHER (specify)		P		206		447		5909	
E. STREET OR P.O. BOX															
1600 NORTON BUILDING															
F. CITY OR TOWN										G. STATE		H. ZIP CODE		IX. INDIAN LAND	
SEATTLE										WA		98104		Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

## X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)				D. PSD (Air Emissions from Proposed Sources)			
9	N			9	P		
B. UIC (Underground Injection of Fluids)				E. OTHER (specify)			
9	U			(specify)			
C. RCRA (Hazardous Wastes)				E. OTHER (specify)			
9	R			(specify)			

## XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

## XII. NATURE OF BUSINESS (provide a brief description)

As a wholesale chemical distributor, Van Waters & Rogers, Inc. distributes various chemical products. As such, we stock an average of 500 packaged chemicals at this location at any one time. The product list will vary from time to time.

## XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)		B. SIGNATURE		C. DATE SIGNED	
James W. Bernard, Vice President		<i>James W. Bernard</i>		October 31, 1986	

## COMMENTS FOR OFFICIAL USE ONLY

C	
C	



**FORM 3 RCRA**  
**EPA**  
**U.S. ENVIRONMENTAL PROTECTION AGENCY**  
**HAZARDOUS WASTE PERMIT APPLICATION**  
*Consolidated Permits Program*  
(This information is required under Section 3005 of RCRA.)

**I. EPA I.D. NUMBER**  
F I L D 0 0 0 8 1 9 9 3 8

**FOR OFFICIAL USE ONLY**

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

**II. FIRST OR REVISED APPLICATION**

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

**A. FIRST APPLICATION** (place an "X" below and provide the appropriate date)

<input type="checkbox"/> 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)	<input type="checkbox"/> 2. NEW FACILITY (Complete item below.)
C YR. MO. DAY 8 73 74 75 76 77 78	C YR. MO. DAY 73 74 75 76 77 78

**B. REVISED APPLICATION** (place an "X" below and complete item I above)

<input checked="" type="checkbox"/> 1. FACILITY HAS INTERIM STATUS	<input type="checkbox"/> 2. FACILITY HAS A RCRA PERMIT
--	--

**III. PROCESSES - CODES AND DESIGN CAPACITIES**

**A. PROCESS CODE** - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

**B. PROCESS DESIGN CAPACITY** - For each code entered in column A enter the capacity of the process.

1. AMOUNT - Enter the amount.
2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
<b>Storage:</b>			<b>Treatment:</b>		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS			GALLONS PER HOUR OR LITERS PER HOUR
<b>Disposal:</b>			OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)	T04	GALLONS PER DAY OR LITERS PER DAY
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			
<b>UNIT OF MEASURE</b>	<b>UNIT OF MEASURE CODE</b>	<b>UNIT OF MEASURE</b>	<b>UNIT OF MEASURE</b>	<b>UNIT OF MEASURE CODE</b>	<b>UNIT OF MEASURE</b>
GALLONS	G	LITERS PER DAY	ACRE-FEET	A	
LITERS	L	TONS PER HOUR	HECTARE-METER	F	
CUBIC YARDS	Y	METRIC TONS PER HOUR	ACRES	B	
CUBIC METERS	C	GALLONS PER HOUR	HECTARES	G	
GALLONS PER DAY	U	LITERS PER HOUR			

**EXAMPLE FOR COMPLETING ITEM III** (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

LINE NUMBER	A. PRO-CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PRO-CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY
		1. AMOUNT (specify)				1. AMOUNT	
X-1	S 0 2	600	G	5			
X-2	T 0 3	20	E	6			
1	S 0 1	6,600 in 55-gallon drums	G	7			
2				8			
3				9			
4				10			



Continued from the front.

### III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

### IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS.....	P	KILOGRAMS.....	K
TONS.....	T	METRIC TONS.....	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

#### D. PROCESSES

##### 1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous waste: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZ. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above



NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

EPA I.D. NUMBER (enter from page 1)													FOR OFFICIAL USE ONLY											
W I L D 0 0 0 8 1 9 9 3 8													W DUP											
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																								
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES																				
				1. PROCESS CODES (enter)										2. PROCESS DESCRIPTION (if a code is not entered in D(1))										
1	F 0 0 1	55,000	P	S 0 1																				
2	F 0 0 2	55,000	P	S 0 1																				
3	F 0 0 3	250,000	P	S 0 1																				
4	F 0 0 5	10,000	P	S 0 1																				
5	D 0 0 1	50,000	P	S 0 1																				
6																								
7																								
8																								
9																								
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26																								



Continued from the front.

**IV. DESCRIPTION OF HAZARDOUS WASTES (continued)**

**E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.**

EPA I.D. NO. (enter from page 1)

F I L D 0 0 0 8 1 9 9 3 8 6

**V. FACILITY DRAWING**

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

**VI. PHOTOGRAPHS**

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

**VII. FACILITY GEOGRAPHIC LOCATION**

LATITUDE (degrees, minutes, & seconds)

4 2 0 4 0 0 9

LONGITUDE (degrees, minutes, & seconds)

0 8 8 0 2 1 8 3

**VIII. FACILITY OWNER**

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & no.)

E Van Waters & Rogers, Inc.

2 0 6 - 4 4 7 - 5 9 0 9

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

F 1600 Norton Building

G Seattle

W A

9 8 1 0 4

**IX. OWNER CERTIFICATION**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

James W. Bernard, Vice President

J. W. Bernard

October 31, 1986

**X. OPERATOR CERTIFICATION**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

James W. Bernard, Vice President

J. W. Bernard

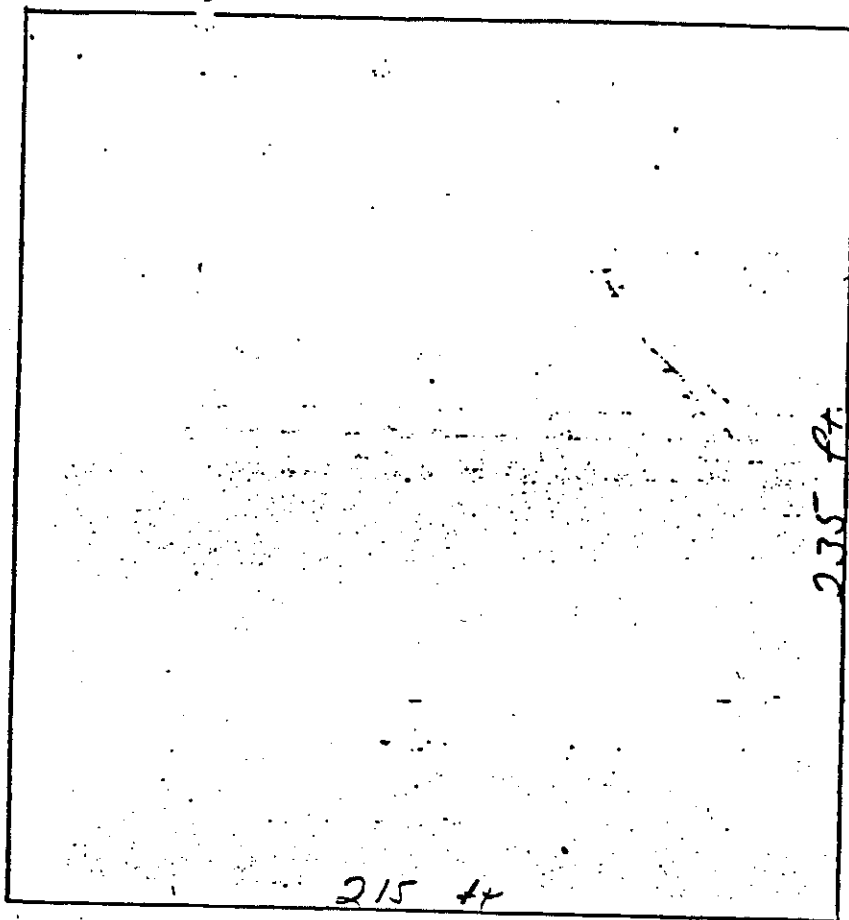
October 31, 1986



187 ft

60 ft

Gate



WASTE DRUM  
STORAGE AREA

Paved  
Yard

12'  
24'

386 ft



Scale 1" = 50'



## APPENDIX A

The materials received and stored consist of the following materials.

	Density <u>Lb/Cubic Feet</u>	Vapor Pressure <u>@ 70°F, PSIA</u>
<u>ALCOHOLS</u>		
Methyl Alcohol	79.4	1.86
Ethyl Alcohol	49.3	0.67
n-Propyl Alcohol	50.2	0.35
Isopropyl Alcohol	49.0	0.72
n-Butyl Alcohol	50.5	0.11
sec-Butyl Alcohol	50.3	0.31
tert-Butyl Alcohol	49.1	0.19
Isobutyl Alcohol	50.0	0.21
<u>ESTERS</u>		
Methyl Acetate	58.3	3.98
Ethyl Acetate	56.2	1.59
n-Propyl Acetate	62.3	0.66
Isopropyl Acetate	54.6	1.12
n-Butyl Acetate	55.0	0.27
<u>GLYCOLS</u>		
Propylene Glycol	64.6	≥ 0.01
Hexylene Glycol	57.4	≥ 0.01
Ethylene Glycol	69.4	≥ 0.01
Dipropylene Glycol	63.7	≥ 0.01
Diethylene Glycol	69.6	≥ 0.01
Triethylene Glycol	70.0	≥ 0.01



	Density <u>Lb/Cubic Feet</u>	Vapor Pressure <u>@ 70°F, PSIA</u>
<u>GLYCOL ETHERS</u>		
Ethylene - Glycol Methyl Ether	60.1	0.12
Ethylene - Glycol Ethyl Ether	57.9	0.07
Ethylene - Glycol Butyl Ether	56.2	0.01
Diethylene Glycol Ethyl Ether	64.0	/ 0.01
Diethylene Glycol Methyl Ether	63.7	/ 0.01
Diethylene Glycol Butyl Ether	59.4	/ 0.01
<u>GLYCOL ETHER ESTERS</u>		
Ethylene Glycol Methyl Ether Acetate	62.6	0.04
Ethylene Glycol Ethyl Ether Acetate	60.7	0.04
Ethylene Glycol Butyl Ether Acetate	58.6	> 0.01



APPENDIX B

WASTE STREAMS

<u>Category</u>	<u>Organic Solvents Included in this Group</u>
F003	Normal Butyl Alcohol Ethyl Acetate Ethyl Ether Methyl Alcohol
F005	Isobutyl Alcohol
D001	Organic liquids having flashpoints less than 140°F



GENERIC WASTE STREAMS

1. Spent glycols (D001) including propylene glycol, hexylene glycol, ethylene glycol, dipropylene glycol, diethylene glycol, and triethylene glycol.
2. Spent alcohols (F003)(D001) including methanol, ethanol, propanol, isopropyl alcohol, butanol, sec-butyl alcohol, tert-butyl alcohol, and isobutyl alcohol.
3. Spent ethers (D001) including ethylene - glycol methyl ether, ethylene - glycol ethyl ether, ethylene - glycol butyl ether, diethylene glycol methyl ether, diethylene glycol ethyl ether, diethylene glycol butyl ether, and tetrahydrofuran.
4. Spent esters (F003)(D001) including dimethyl formamide, methyl acetate, ethyl acetate, propyl acetate, isopropyl acetate, butyl acetate, sec-butyl acetate, isobutyl acetate, isobutyl isobutyrate, ethylene glycol methyl ether acetate, ethylene glycol butyl ether acetate, ethylene glycol ethyl ether acetate, diethylene glycol ethyl ether acetate, and diethylene glycol butyl ether acetate.



## APPENDIX D

ADDITIONAL INFORMATION ABOUT THE WASTE STREAMS

<u>Component/Contaminate Name</u>	<u>Range (% Volume)</u>
Water	0-60%
Oils	0-25%
Paint Pigments	0-35%
Resins	0-25%
Urethane Polymers	0-20%
Adhesives	0-20%
Varnish	0-30%
Salts	0-10%

These components/contaminates would have been dissolved or suspended into the solvents as the solvents were used in thin normal industrial applications (cleaning solvents, degreasing solvents, separation solvents, paint solvents, paint thinners, etc.).



CERTIFIED MAIL #P012382614  
RETURN RECEIPT REQUESTED

**McKesson**

December 12, 1985

RECEIVED

DEC 19 1985

SOLID WASTE BRANCH  
U.S. EPA, REGION V

RECEIVED

DEC 17 1985

OFFICE OF REGIONAL  
ADMINISTRATION

U. S. EPA, Region V  
230 South Dearborn  
Chicago, IL 60604

Gentlemen:

ILD 000819938 G, TR TSD, PA

Attached for your records are revised General Information Form, revised page 1 of 5 Hazardous Waste Permit Application, and revised page 3 of 5 Hazardous Waste Permit Application.

A copy has also been provided to Illinois EPA.

Sincerely,

McKESSON CHEMICAL COMPANY

*R. Hickman*

Robert D. Hickman  
Regional Field Compliance Specialist

RDH:be

Attachment

0. WMD  
CC: RF (CERT-FROUTINE)

RECEIVED

DEC 18 1985

SOLID WASTE BRANCH  
U.S. EPA, REGION V



**FORM 1**  
**GENERAL**

**EPA**

**LABEL ITEMS**

**I. EPA I.D. NUMBER**

**III. FACILITY NAME**

**V. FACILITY MAILING ADDRESS**

**VI. FACILITY LOCATION**

McKesson Chemical Company  
2055 Hammond Drive  
Schaumburg IL 60193

2055 Hammond Drive  
Schaumburg IL 60193

**I. EPA I.D. NUMBER**

**GENERAL INSTRUCTIONS**

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

**II. POLLUTANT CHARACTERISTICS**

**INSTRUCTIONS:** Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X'			SPECIFIC QUESTIONS	MARK 'X'		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X			F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

**III. NAME OF FACILITY**

1 SKIP McKesson Chemical Company

**IV. FACILITY CONTACT**

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
2 Coyle, George Manager	312 397 2715

**V. FACILITY MAILING ADDRESS**

A. STREET OR P.O. BOX	B. CITY OR TOWN	C. STATE	D. ZIP CODE
3 2055 Hammond Drive	4 Schaumburg	IL	60193

**VI. FACILITY LOCATION**

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER	B. COUNTY NAME	C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
5 2055 Hammond Drive	Cook	6 Schaumburg	IL	60193	



## VII. SIC CODES (4-digit, in order of priority)

A. FIRST										B. SECOND									
7 5 1 6 1 (specify) Distributor										7 (specify)									
C. THIRD										D. FOURTH									
7 (specify)										7 (specify)									

## VIII. OPERATOR INFORMATION

A. NAME																														B. Is the name listed in Item VIII-A also the owner?									
8 McKesson Corporation																														<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO									
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)																				D. PHONE (area code & no.)																			
F = FEDERAL S = STATE P = PRIVATE										M = PUBLIC (other than federal or state) O = OTHER (specify)										P (specify)										A (specify)									
E. STREET OR P.O. BOX																																							
One Post Street																																							
F. CITY OR TOWN																				G. STATE					H. ZIP CODE					IX. INDIAN LAND									
B San Francisco																				C A					9 4 1 0 4					Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO									

## X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)															D. PSD (Air Emissions from Proposed Sources)														
9 N															9 P														
B. UIC (Underground Injection of Fluids)															E. OTHER (specify)														
9 U															(specify)														
C. RCRA (Hazardous Wastes)															E. OTHER (specify)														
9 R															(specify)														

## XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

## XII. NATURE OF BUSINESS (provide a brief description)

McKesson Chemical Company is a nationwide distributor of organic and inorganic chemicals. It also provides various services to its customers, which may include occasionally picking up and transporting drummed materials (which would classify as wastes) to central recycling facilities. This may, at times, require temporary storage at our facility of some such drummed materials in order to accumulate full truckloads.

## XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)															B. SIGNATURE															C. DATE SIGNED									
Ronald R. Powell Regional Vice President																														12-6-85									

## COMMENTS FOR OFFICIAL USE ONLY

C																													
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EPA I.D. NUMBER (enter from page 1)													FOR OFFICIAL USE ONLY														
W I L D 0 0 0 8 1 9 9 3 8 1													W DUP 2 DUP														
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																											
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES																							
				1. PROCESS CODES (enter)																							
				27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50
1	F 0 0 1	55,000	P	S	0	1																					
2	F 0 0 3	250,000	P	S	0	1																					
3	F 0 0 5	10,000	P	S	0	1																					
4	F 0 0 2	55,000	P	S	0	1																					
5	D 0 0 1	50,000	P	S	0	1																					
6																											
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26																											



E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

[illegible]

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

All existing facilities must include photographs (*aerial or ground-level*) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (*see instructions for more detail*).

## LATITUDE (degrees, minutes, &amp; seconds)

4	2	0	4	0	0	9
百位	十位	百位	十位	百位	十位	个位

LONGITUDE (degrees, minutes, &amp; seconds)

0	8	8
0	2	1
8	8	3

☐ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER															2. PHONE NO. (area code & no.)																				
C																																			
E																																			
15 16															55 56 57 58 59 60 61 62 63 64 65																				
3. STREET OR P.O. BOX															4. CITY OR TOWN										5. ST.					6. ZIP CODE					
C																																			
F																																			
15 16															55 56 57 58 59 60 61 62 63 64 65										17 18 19					20 21 22					
G																																			

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

<p>A. NAME (print or type)</p> <p>Ronald R. Powell</p> <p>Regional Vice President</p>	<p>B. SIGNATURE</p> 	<p>C. DATE SIGNED</p> <p>12-6-85</p>
---	--	--------------------------------------

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
Ronald R. Powell		12-6-80
Regional Vice President		

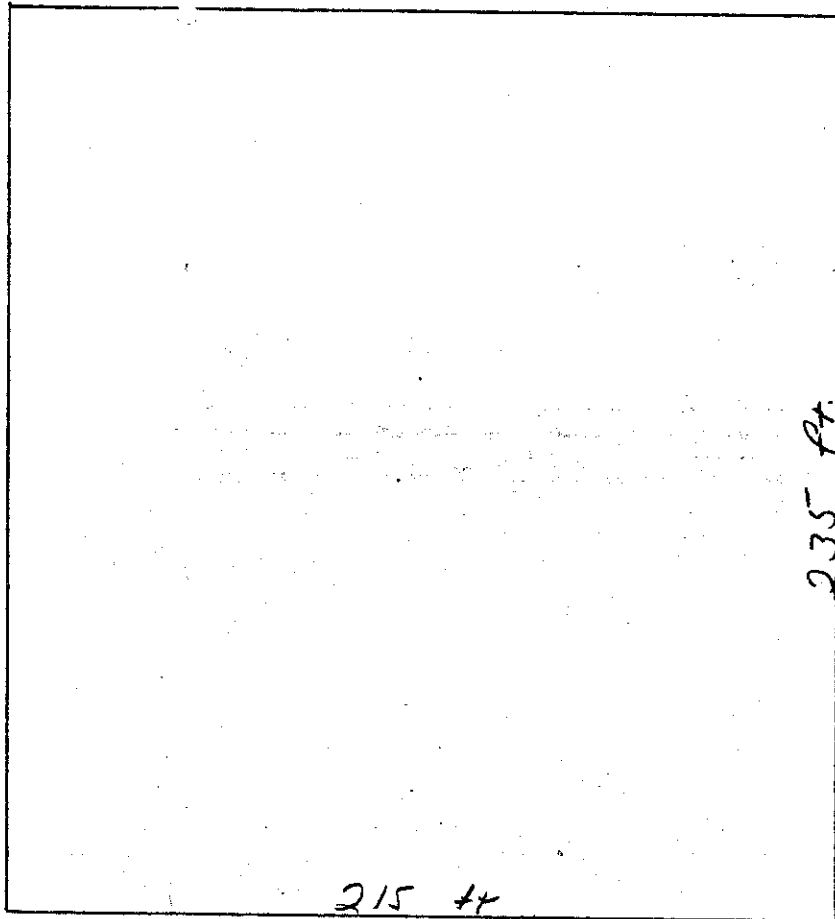


V. FACILITY DRAWING (see page 4)

187 ft

60 ft

Gate

WASTE DRUM  
STORAGE AREAPaved  
Yard12'  
24'

309 ft

386 ft



Scale 1" = 50'



<b>FORM 1</b>		<b>ENVIRONMENTAL PROTECTION AGENCY</b>	
<b>GENERAL</b>		<b>GENERAL INFORMATION</b>	
		<b>Consolidated Permits Program</b>	
		<i>(Read the "General Instructions" before starting.)</i>	
<b>LABEL ITEMS</b>			
<b>EPA I.D. NUMBER</b>			
<b>III. FACILITY NAME</b>		MCKESSON CHEMICAL COMPANY	
<b>V. FACILITY MAILING ADDRESS</b>		2055 HAMMOND DRIVE SCHAUMBURG IL 60193	
<b>VI. FACILITY LOCATION</b>		2055 HAMMOND DRIVE SCHAUMBURG IL 60193	

<b>I. EPA I.D. NUMBER</b>														
FL 00108199383 D														
<b>GENERAL INSTRUCTIONS</b>														
If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.														

**II. POLLUTANT CHARACTERISTICS**

**INSTRUCTIONS:** Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X'			SPECIFIC QUESTIONS	MARK 'X'		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility <del>store, or dispose of</del> <b>store, or dispose of</b> hazardous waste? (FORM 3)	X			F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

**III. NAME OF FACILITY**

1	SKIP	MCKESSON CHEMICAL COMPANY
---	------	---------------------------

**IV. FACILITY CONTACT**

<b>A. NAME &amp; TITLE (last, first, &amp; title)</b>		<b>B. PHONE (area code &amp; no.)</b>	
2	MORGAN JAMES E.F. MANAGER	312	254 1166

**V. FACILITY MAILING ADDRESS**

<b>A. STREET OR P.O. BOX</b>	
3	2055 HAMMOND DRIVE
<b>B. CITY OR TOWN</b>	
4	SCHAUMBURG
<b>C. STATE</b>	<b>D. ZIP CODE</b>
IL	60193

**VI. FACILITY LOCATION**

<b>A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER</b>		
5	2055 HAMMOND DRIVE	
<b>B. COUNTY NAME</b>		
COOK		
<b>C. CITY OR TOWN</b>		
6	SCHAUMBURG	
<b>D. STATE</b>	<b>E. ZIP CODE</b>	<b>F. COUNTY CODE (if known)</b>
IL	60193	031



CONTINUED FROM THE FRONT

## VII. SIC CODES (4-digit, in order of priority)

A. FIRST				B. SECOND			
7	5	1	6	(specify)	Distributor	7	
15	16	17	18			15	16
C. THIRD				D. FOURTH			
7				(specify)		7	
15	16	17	18			15	16

## VIII. OPERATOR INFORMATION

A. NAME												B. Is the name listed in Item VIII-A also the owner?	
8	FOREMOST - McKESSON INC.											<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
15	16											55	66
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)												D. PHONE (area code & no.)	
F = FEDERAL		M = PUBLIC (other than federal or state)		P (specify)		A							
S = STATE		O = OTHER (specify)											
P = PRIVATE													
E. STREET OR P.O. BOX													
ONE POST STREET													
F. CITY OR TOWN												G. STATE	
SAN FRANCISCO												CA	
H. ZIP CODE												IX. INDIAN LAND	
94104												Is the facility located on Indian lands?	
												<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
												52	

## X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)						D. PSD (Air Emissions from Proposed Sources)					
9	N					9	P				
15	16	17	18	19	20	15	16	17	18	19	20
B. UIC (Underground Injection of Fluids)						E. OTHER (specify)					
9	U					9					
15	16	17	18	19	20	15	16	17	18	19	20
C. RCRA (Hazardous Wastes)						E. OTHER (specify)					
9	R					9					
15	16	17	18	19	20	15	16	17	18	19	20

## XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

F 9: A / 50

## XII. NATURE OF BUSINESS (provide a brief description)

McKesson Chemical Company is a nationwide distributor of Organic and Inorganic chemicals. It also provides various services to its customers, which may include occasionally picking up and transporting drummed materials (which would classify as wastes) to central recycling facilities. This may, at times, require temporary storage at our facility of some such drummed materials in order to accumulate full truckloads.

F 9: A / 51

## XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
M. A. Minor Regional Vice President	<i>ma minor</i>	11-13-80

## COMMENTS FOR OFFICIAL USE ONLY

C	
15	16



Continued from page 2.

NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)										FOR OFFICIAL USE ONLY									
WI 4000081993831										W DUP 32 DUP									
DESCRIPTION OF HAZARDOUS WASTES (continued)																			
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)				B. ESTIMATED ANNUAL QUANTITY OF WASTE				C. UNIT OF MEASURE (enter code)	D. PROCESSES									
	23	24	25	26	27	28	29	30		31	32	33	34	35	36	37	38	39	40
1	F	0	0	1	261,000	000	000	P	S	0	1								
2	F	0	0	3	70,000	000	000	P	S	0	1								
3	F	0	0	5	37,000	000	000	P	S	0	1								
4																			
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26																			



E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. (enter from page 1)															
S													T/A	C	
F	I	D	D	b	p	0	0	0	2	9	9	3	8	3	6
1	2												13	14	15

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (*see instructions for more detail*).

FC-A/55

All existing facilities must include photographs (*aerial or ground-level*) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (*see instructions for more detail*). *EC: N/S*

Existing storage,  
FG-N/56

## LATITUDE (degrees, minutes, &amp; seconds)

4	2	0	4	0	0	9
65	66	67	68	69	70	71

LONGITUDE (degrees, minutes, &amp; seconds)

0	8	8
72	-	74

0	2	
75	-	76


1	8	3
77	-	79

☐ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.


**B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:**

1. NAME OF FACILITY'S LEGAL OWNER															2. PHONE NO. (area code & no.)												
C																											
E																											
15	16															55	56	-	58	59	-	61	62	-	65		
3. STREET OR P.O. BOX										4. CITY OR TOWN										5. ST.		6. ZIP CODE					
C											C																
F											G																
15	16															45	46	-	48	49	-	51	52	-	54		

*I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.*

<b>A. NAME (print or type)</b> M. A. Minor Regional Vice President	<b>B. SIGNATURE</b> 	<b>C. DATE SIGNED</b> 11-17-80
--	---	-----------------------------------

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
M. A. Minor Regional Vice President		11-17-80



<b>FORM</b> <b>3</b>	<b>EPA</b>	<b>ENVIRONMENTAL PROTECTION AGENCY</b> <b>HAZARDOUS WASTE PERMIT APPLICATION</b> Consolidated Permits Program <i>(This information is required under Section 3005 of RCRA.)</i>	<b>I. EPA I.D. NUMBER</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;">             14 000 081 993 83           </div>
-------------------------	------------	--	---

FOR OFFICIAL USE ONLY		COMMENTS
APPLICATION APPROVED <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	DATE RECEIVED (yr., mo., & day) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	

**II. FIRST OR REVISED APPLICATION**  
 Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in item I above.

<b>A. FIRST APPLICATION</b> (place an "X" below and provide the appropriate date) <input type="checkbox"/> 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.) <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin-right: 5px;">C</div> <div style="border: 1px solid black; padding: 2px;">             YR. MO. DAY              81 02 01           </div> </div> FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)	<input checked="" type="checkbox"/> 2. NEW FACILITY (Complete item below.) FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin-right: 5px;">YR.</div> <div style="border: 1px solid black; padding: 2px;">             81 02 01           </div> </div>
---	--

**B. REVISED APPLICATION** (place an "X" below and complete item 1 above)  
☐ 1. FACILITY HAS INTERIM STATUS  
☐ 2. FACILITY HAS A RCRA PERMIT

**III. PROCESSES - CODES AND DESIGN CAPACITIES**  
**A. PROCESS CODE** - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

**B. PROCESS DESIGN CAPACITY** - For each code entered in column A enter the capacity of the process.  
 1. AMOUNT - Enter the amount.  
 2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
<b>Storage:</b>			<b>Treatment:</b>		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS			
<b>Disposal:</b>			OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)	T04	GALLONS PER DAY OR LITERS PER DAY
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			

UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G	LITERS PER DAY	V	ACRE-FEET	A
LITERS	L	TONS PER HOUR	D	HECTARE-METER	F
CUBIC YARDS	Y	METRIC TONS PER HOUR	W	ACRES	B
CUBIC METERS	C	GALLONS PER HOUR	E	HECTARES	Q
GALLONS PER DAY	U	LITERS PER HOUR	H		

**EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below):** A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

<div style="display: flex; justify-content: space-between;"> <span>C</span> <span>DUP</span> <span>31</span> </div>													
LINE NUMBER	A. PRO-CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY				FOR OFFICIAL USE ONLY	LINE NUMBER	A. PRO-CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY				FOR OFFICIAL USE ONLY
		1. AMOUNT (specify)		2. UNIT OF MEASURE (enter code)					1. AMOUNT		2. UNIT OF MEASURE (enter code)		
X-1	S02	200		G			5						
X-2	T03	20		E			6						
1	S01	In 55 gallon drums		G			7						
3							9						
4							10						



**III. PROCESSES (continued)**

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

**IV. DESCRIPTION OF HAZARDOUS WASTES**

**A. EPA HAZARDOUS WASTE NUMBER** — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

**B. ESTIMATED ANNUAL QUANTITY** — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

**C. UNIT OF MEASURE** — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS . . . . .	P	KILOGRAMS . . . . .	K
TONS . . . . .	T	METRIC TONS . . . . .	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

**D. PROCESSES****1. PROCESS CODES:**

**For listed hazardous waste:** For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

**For non-listed hazardous wastes:** For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

**Note:** Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

**2. PROCESS DESCRIPTION:** If a code is not listed for a process that will be used, describe the process in the space provided on the form.

**NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER** — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

**EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below)** — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

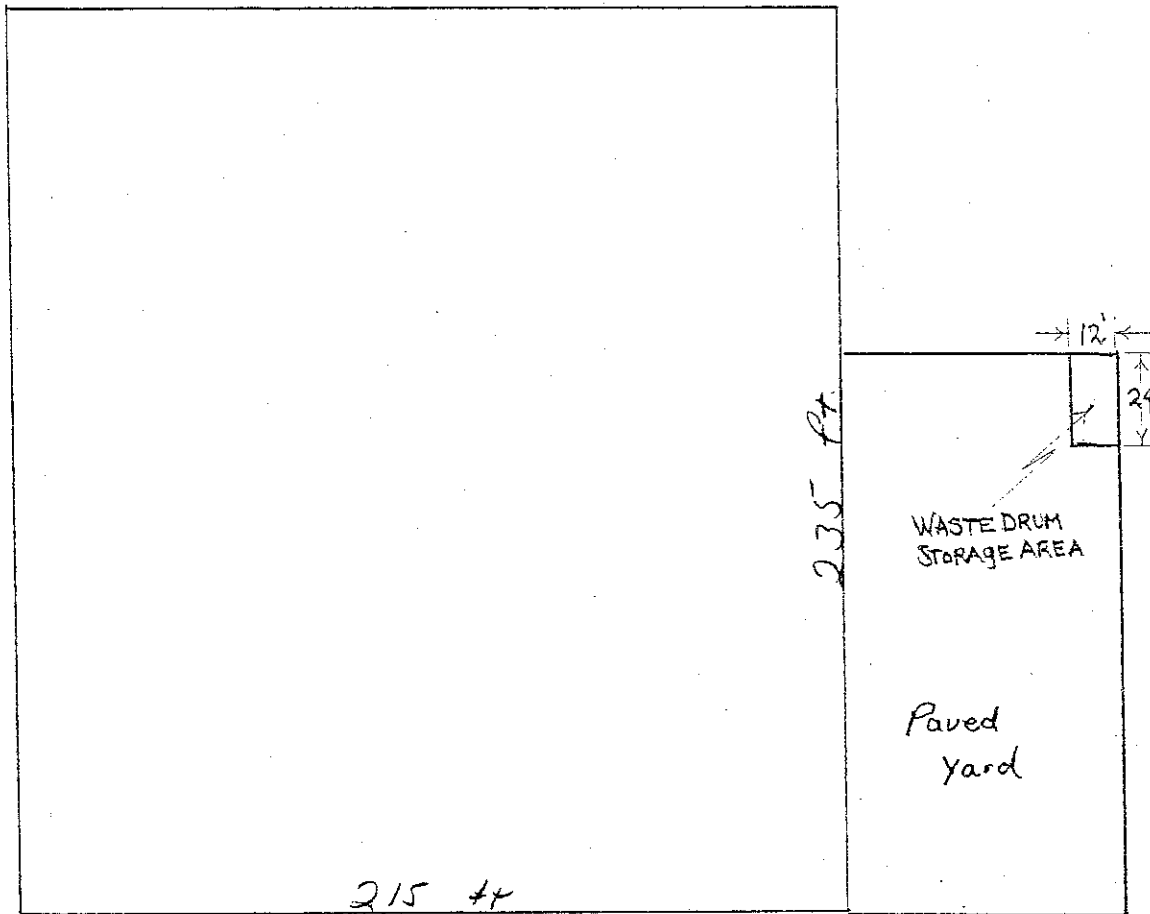
LINE NO.	A. EPA HAZARDOUS WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above



V. FACILITY DRAWING (see page 4)

397 ft

42



N ↑

Scale 1" = 50'



A.4 Closure/  
Post-Closure





State of Illinois

# ENVIRONMENTAL PROTECTION AGENCY

USEPA

Mary A. Gade, Director  
217/524-3300

2200 Churchill Road, Springfield, IL 62794-9276

A.4.1.

May 11, 1993

Van Waters and Rogers, Inc.  
Attn: James Hooper  
600 Hunter Drive  
Oak Brook, Illinois 60521-1926

Re: 0314890001 -- Cook County  
Van Waters and Rogers, Inc.  
ILD000819938  
Log No. C-703  
Received: August 14, 1992  
RCRA - Closure

Dear Mr. Hooper:

The closure plan submitted by Van Waters and Rogers, Inc. for the facility located at 2055 Hammond Drive in Schaumburg has been reviewed by this Agency. Your final closure plan to close the drum storage area (S01) is hereby approved subject to the following conditions.

1. Closure activities must be completed by November 15, 1994. When closure is complete the owner or operator must submit to the Agency certification both by the owner or operator and by an independent registered professional engineer that the facility has been closed in accordance with the specifications in the approved closure plan. This certification must be received at this Agency within sixty (60) days after closure, or by January 15, 1994.

The attached closure certification form must be used. Signatures must meet the requirements of 35 Ill. Adm. Code Section 702.126. The independent engineer should be present at all critical, major points (activities) during the closure. These might include soil sampling, soil removal, backfilling, final cover placement, etc. The frequency of inspections by the independent engineer must be sufficient to determine the adequacy of each critical activity. Financial assurance must be maintained for the units approved for closure herein until the Agency approves the facility's closure certification.

The Illinois Professional Engineering Act (Ill. Rev. Stat., Ch. 111, par. 5101 et. seq.) requires that any person who practices professional engineering in the State of Illinois or implies that he (she) is a professional engineer must be registered under the Illinois Professional Engineering Act (par. 5101, Sec. 1). Therefore, any certification or engineering services which are performed for a closure plan in the State of Illinois must be done by an Illinois P.E.



Plans and specifications, designs, drawings, reports, and other documents rendered as professional engineering services, and revisions of the above must be sealed and signed by a professional engineer in accordance with par. 5119, sec. 13.1 of the Illinois Professional Engineering Act.

As part of the closure certification, to document the closure activities at your facility, a Closure Documentation Report which must be submitted which includes the following:

- a. The volume of waste and waste residue removed. The term waste includes wastes resulting from decontamination activities.
- b. A description of the method of waste handling and transport.
- c. The waste manifest numbers.
- d. Copies of the waste manifests.
- e. A description of the sampling and analytical methods used including sample preservation methods and chain-of-custody information.
- f. A chronological summary of closure activities and the cost involved.
- g. Color photo documentation of closure. Document conditions before, during and after closure.
- h. Tests performed, methods and results.

The original and two (2) copies of all certifications, logs, or reports which are required to be submitted to the Agency by the facility should be mailed to the following address:

Illinois Environmental Protection Agency  
Bureau of Land -- #33  
Permit Section  
2200 Churchill Road  
Post Office Box 19276  
Springfield, Illinois 62794-9276

2. If the Agency determines that implementation of this closure plan fails to satisfy the requirements of 35 Ill. Adm. Code, Section 725.211, the Agency reserves the right to amend the closure plan. Revisions of closure plans are subject to the appeal provisions of Section 40 of the Illinois Environmental Protection Act.
3. If contamination is detected, the Agency must be notified in writing within fifteen (15) days. A revised closure plan addressing remediation of the contamination detected must be submitted within timeframes established by the Agency.



4. A request for release of financial assurance documents should be included with the closure certification documents.
5. Under the provisions of 29 CFR 1910 (51 FR 15,654, December 19, 1986), cleanup operations must meet the applicable requirements of OSHA's Hazardous Waste Operations and Emergency Response standard. These requirements include hazard communication, medical surveillance, health and safety programs, air monitoring, decontamination and training. General site workers engaged in activities that expose or potentially expose them to hazardous substances must receive a minimum of 40 hours of safety and health training off site plus a minimum of three days of actual field experience under the direct supervision of a trained experienced supervisor. Managers and supervisors at the cleanup site must have at least an additional eight hours of specialized training on managing hazardous waste operations.
6. The drum storage floor must be steam cleaned and triple rinsed. All wash and rinse water shall be collected. If the wash or rinse water samples exhibit a characteristic of hazardous waste then that material must be managed as a hazardous waste. In any event the material must be managed as a special waste.
7. In order to determine the extent of contamination the soil sampling plan shall be modified as follows:
  - A. The locations of the soil samples collected shall be modified as follows:
    - a. All soil borings shall be performed as close to the concrete pad as possible, but no more than one (1) foot from the edge of the concrete pad.
    - b. One (1) soil boring shall be obtained from each side of the concrete pad. Each soil boring shall be located at the midpoint of each side.
    - c. The depths of each crack in the concrete pad must be determined and documented. The procedures followed to determine the depth of each crack must be described. If a crack penetrates the full depth of the concrete pad, a soil boring shall be taken in that crack. If more than one crack penetrates the full depth of the concrete pad, two soil borings shall be taken in any two cracks which penetrate the full depth of the concrete pad.
    - d. Soil samples from the borings on each side of the concrete pad shall be taken at depths of six (6) to twelve (12) inches and thirty (30) to thirty-six (36) inches.
    - e. Soil samples from the borings in the concrete pad shall be collected one (1) foot beneath the concrete pad.



- B. All soil samples collected from the above specified locations shall be analyzed for the following parameters.

- . Volatile Organics (Method 8240)
- . Semi-Volatile Organics (Method 8270)

All soil samples shall be analyzed individually (i.e., no compositing). Analytical procedures shall be conducted in accordance with Test Methods for Evaluating Solid Wastes, Third Edition (SW-846) and Attachment 7 to this Agency's closure plan instruction package. When a SW-846 (Third Edition) analytical method is specified, all the chemicals listed in the Quantitation Limits Table for that method shall be reported unless specifically exempted in writing by the Agency. When visually discolored or contaminated material exists within an area to be sampled, horizontal placement of sampling locations shall be adjusted to include such visually discolored and/or contaminated areas. Sample size per interval shall be minimized to prevent dilution of any contamination. Apparent visually contaminated material within a sampling interval shall be included in the sample portion of the interval to be analyzed. To demonstrate a parameter is not present in a sample, analysis results must show a detection limit at least as low as the PQL for that parameter in the third edition of SW-846. For inorganic parameters, the detection limit must be at least as low as the RCRA Groundwater Detection Limits, as referenced in SW-846 (Third Edition) Volume 1A, pages TWO-29 and TWO-30, Table 2-15. If possible, your sampling program should be extensive enough to determine the lateral and vertical extent of contamination to the detection limit (PQLs) referenced above.

8. The cleanup objectives proposed in the closure plan submittal are not approved. The Agency will establish cleanup objectives to be used to determine if "clean" closure (closure by removal) has been achieved upon receipt and review of the sampling and analytical results required in the approved closure plan. These sampling and analytical results along with a proposal for site specific cleanup objectives (if you wish to propose them) must be submitted to this Agency by July 15, 1993. Along with the analytical results submit the following:
- . The test methods used and detection limits achieved.
  - . The depth and interval of samples taken.
  - . A description of how the samples were obtained.
  - . A scale drawing showing the location of the units, their associated piping and equipment, and the location of the samples obtained. This must include at least three (3) cross sections of the excavations.
9. If clean closure cannot be achieved pursuant to 35 IAC 725.297(a) then a modified closure plan and a post-closure plan prepared pursuant to 35 IAC Section 725.297(b) must be submitted to the Agency for review and approval within 60 days of such a determination.



10. The following information must be provided by July 15, 1993:

A clear statement of the status of the facility following closure. 1  
Indicate which of the following categories describes the intended use of the facility:

- a. No treatment, storage or disposal will occur at this facility.
  - b. Disposal will continue at this facility.
  - c. This facility will continue to treat hazardous wastes.
  - d. Less than 1,000 kg/month will be generated, and storage will be for less than 90 days.
  - e. The facility will generate and store more than 1,000 kg/month for less than 90 days.
  - f. The facility will generate and store more than 1,000 kg/month for more than 90 days.
  - g. The facility will generate and store more than 100 kg/month, but less than 1,000 kg/month for less than 180 days (270 days if applicable).
  - h. The facility will be exempt from treatment, storage and disposal (TSD) regulation under RCRA.
  - i. The facility will be a transporter of hazardous waste.
  - j. This facility is prohibited from beginning closure until this information is received and approved by the Agency.
11. 35 IAC 721.131 F001 through F005 wastes must be disposed in accordance with 35 IAC Part 728.
12. To avoid creating another regulated storage unit during closure, it is recommended that you obtain any necessary permits for waste disposal prior to initiating excavation activities. If it is necessary to store excavated hazardous waste on-site prior to off-site disposal, do so only in containers or tanks for less than ninety (90) days. Do not create regulated waste pile units by storing the excavated hazardous waste in piles. The ninety (90) day accumulation time exemption (35 IAC 722.134) only applies to containers and tanks.
13. Please be advised that the requirements of the Responsible Property Transfer Act (Public Act 85-1228) may apply to your facility due to the management of RCRA hazardous waste. In addition, please be advised that if you store or treat on-site generated hazardous waste in containers or tanks pursuant to 35 IAC 722.134, those units are subject to the closure requirements identified in 35 IAC 722.134(a)(1).

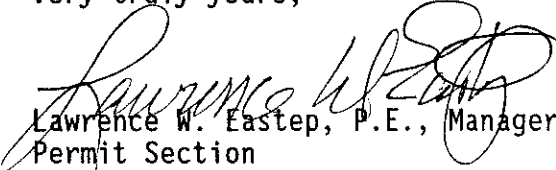


14. All hazardous wastes that result from this project are subject to annual reporting as required in 35 IAC 722.141 and shall be reported to the Agency by March 1 of the following year for wastes treated and left on-site or shipped off-site for storage, treatment and/or disposal during any calendar year. Additional information and appropriate report forms may be obtained from the Agency by contacting:

Facility Reporting Unit  
Bureau of Land  
Illinois Environmental Protection Agency  
2200 Churchill Road  
P.O. Box 19276  
Springfield, Illinois 62794-9276

Should you have any questions regarding this matter, please contact Ron Harmon at 217/524-3300.

Very truly yours,



Lawrence W. Eastep, P.E., Manager  
Permit Section  
Division of Land Pollution Control  
Bureau of Land

<sup>RAH</sup>  
LWE:RAH:sf/384Y,63-68

Attachment

cc: USEPA Region V -- George Hamper



ATTACHMENT

This statement is to be completed by both the responsible officer and by the registered professional engineer upon completion of closure. Submit one copy of the certification with original signatures and three additional copies.

Closure Certification Statement

Closure Log C-703

The hazardous waste management S02 units at the facility described in this document have been closed in accordance with the specifications in the approved closure plan. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

\_\_\_\_\_  
USEPA ID Number

\_\_\_\_\_  
Facility Name

\_\_\_\_\_  
Signature of Owner/Operator      Date

\_\_\_\_\_  
Name and Title

\_\_\_\_\_  
Signature of Registered P.E.      Date

\_\_\_\_\_  
Name of Registered P.E. and Illinois  
Registration Number

\_\_\_\_\_  
Mailing Address of P.E.:

\_\_\_\_\_  
Registered P.E.'s Seal:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RAH:sf/384Y,69



## ATTACHMENT

### Soil Volatile Sampling Procedures

#### Procedure:

- A. PREPARATION AND DECONTAMINATION OF SOIL SAMPLER (i.e. STAINLESS STEEL, BRASS, BRONZE, COPPER, etc.). An example of these samplers would be a shelby tube, split-barrel sampler with metal tube inserts or california sampler. These are only examples. There may be more types available. Also, the sample tube **must** be at least six inches long.
- \*1. Wash tubing or sampler with hot water and a nonfoaming detergent.
  - 2. Rinse with hot water.
  - \*3. Rinse with a solvent, such as hexane or acetone.
  - 4. Rinse with very hot water to drive off solvent.
  - 5. Rinse with deionized distilled water.
  - 6. Air Dry
  - 7. Store the sampler in aluminum foil until ready for use.
  - \* Consult the laboratory for specific recommendations.
- B. SOIL SAMPLING FOR VOLATILE ORGANICS
- 1. Using a properly decontaminated sampler (refer to preparation and decontamination instructions), push or drive the sampler to obtain a representative soil sample.
  - 2. **DO NOT** remove sample from sample tube in the field. The laboratory should remove the sample from the sampling tube.
  - 3. Immediately add clay or other cohesive material (i.e. wetted bentonite) to the ends of the sample to eliminate head space, if necessary.
  - 4. Cover both ends of the sampler with aluminum foil. If possible, cover the aluminum foil with a cap.
  - 5. Put the sample in storage at 4 degrees centigrade immediately.
  - 6. Transport the samples to the laboratory as soon as possible. Most laboratories require delivery within 24 hours of sampling.

**NOTE:** Soil samples which will be tested for volatile organic constituents cannot be composited because of the volatilization which would result from any compositing method.



June 27, 1986

McKesson

Office of the Regional Administrator  
Environmental Protection Agency  
Region V  
Federal Building  
230 South Dearborn  
Chicago, IL 60604

Re: Federal Financial Requirements  
Hazardous Waste TSD Facilities

Dear Sir or Madam:

On behalf of McKesson Corporation and its wholly-owned subsidiaries (the "McKesson Group") we hereby submit the enclosed documents to meet the financial test and to demonstrate the financial responsibility of the McKesson Group under the standards of the Environmental Protection Agency applicable to owners and operators of hazardous waste treatment, storage and disposal facilities.

1. The letter of Alan J. Seelenfreund, Vice President and Chief Financial Officer of McKesson Corporation ("McKesson");

2. The Annual Report of McKesson Corporation for the fiscal year ended March 31, 1986, which report contains the independent certified public accountants' report on the financial statements of the McKesson Group; and

3. The special report of Deloitte Haskins + Sells to the effect specified in the regulations.

The facilities owned by the McKesson Group are either operated by McKesson Chemical Company (a division of McKesson) or McKesson EnviroSystems Company (a wholly-owned subsidiary of McKesson). With respect to the facilities owned and operated by McKesson Chemical Company, we are submitting this material to satisfy both the requirements for liability coverage, and

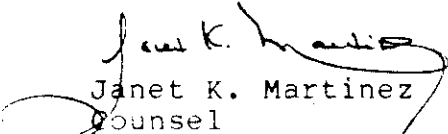


June 27, 1986  
Page Two

closure care. Note further that the figure indicating the sum of closure cost estimates is an aggregate of the estimates for the facilities in all EPA regions -- although only the specific facilities in your state are listed in Mr. Seelenfreund's letter.

I trust that you will find all of the enclosed material to be in order; however, should you have questions or require further information or details, kindly address all inquiries on this matter to me. Thank you very much.

Very truly yours,



Janet K. Martinez  
Counsel

JKM:sh

Enclosures



June 27, 1986

**McKesson**

Office of the Regional Administrator  
Environmental Protection Agency  
Region V  
Federal Building  
230 South Dearborn  
Chicago, IL 60604

Re: McKesson Corporation Financial Tests  
for Liability Coverage and Closure Cost Care

Dear Sir or Madam:

I am the Chief Financial Officer of McKesson Corporation ("McKesson") located at One Post Street, San Francisco, California 94104. This letter is in support of the use of the financial test to demonstrate financial responsibility for liability coverage and closure as specified in Subpart H of 40 CFR Parts 264 and 265.

The owner or operator identified above is the owner or operator of the following facilities for which liability coverage is being demonstrated through the financial test specified in Subpart H of 40 CFR Parts 264 and 265:

\*See Exhibit "A" attached hereto and fully incorporated herein by reference.

1. The owner or operator identified above owns or operates the following facilities for which financial assurance for closure or post-closure care is demonstrated through the financial test specified in Subpart H of 40 CFR Parts 264 and 265. The current closure and/or post-closure cost estimates covered by the test are shown for each facility:

\*See Exhibit "B" attached hereto and fully incorporated herein by reference.



2. The owner or operator identified above guarantees through the corporate guarantee specified in Subpart H of 40 CFR Parts 264 and 265, the closure and post-closure care of the following facilities owned or operated by its subsidiaries. The current cost estimates for the closure or post-closure care so guaranteed are shown for each facility.

\*See Exhibit "C" attached hereto and fully incorporated herein by reference.

3. In states where EPA is not administering the financial requirements of Subpart H of 40 CFR Parts 264 and 265, this owner or operator is demonstrating financial assurance for the closure or post-closure care of the following facilities through the use of a test equivalent or substantially equivalent to the financial test specified in Subpart H of 40 CFR Parts 264 and 265. The current closure and/or post-closure cost estimates covered by such a test are shown for each facility:

\*See Exhibit "D" attached hereto and fully incorporated herein by reference.

4. The owner or operator identified above owns or operates the following hazardous waste management facilities for which financial assurance for closure or, if a disposal facility, post-closure care, is not demonstrated either to EPA or a state through the financial test or any other financial assurance mechanism specified in Subpart H of 40 CFR Parts 264 and 265 or equivalent or substantially equivalent state mechanisms. The current closure and/or post-closure cost estimates not covered by such financial assurance are shown for each facility:

\*None.

This owner or operator is required to file a Form 10K with the Securities and Exchange Commission ("SEC") for the latest fiscal year.

The fiscal year of this owner or operator ends on March 31. The figures for the following items marked with an asterisk are derived from this owner or operator's independently



June 27, 1986

Page Three

audited, year-end financial statements for the latest completed fiscal year ended March 31, 1986:

ALTERNATIVE II

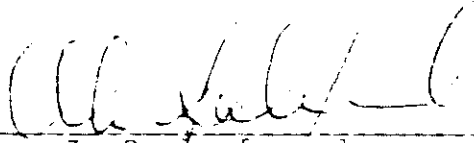
- |      |  |                   |
|------|--|-------------------|
| 1.   | Sum of current closure and post-closure cost estimates. (total of all cost estimates listed above) | \$1,527,706       |
| 2.   | Amount of annual aggregate liability coverage to be demonstrated.                                  | \$2,000,000       |
| 3.   | Sum of lines 1 and 2.  | \$3,527,706       |
| 4.   | Current bond rating of most recent issuance and name of rating service.                            | Moody's A3        |
| 5.   | Date of issuance of bond.  | February 21, 1986 |
| 6.   | Date of maturity of bond.  | February 15, 1991 |
| *7.  | Tangible Net Worth.  | \$376,000,000     |
| *8.  | Total assets in the U.S.   | N/A               |
| 9.   | Is line 7 at least \$10 million?   | Yes               |
| 10.  | Is line 7 at least 6 times line 3?   | Yes               |
| *11. | Are at least 90% of assets located in the U.S.?  | Yes               |
| 12.  | Is line 8 at least 6 times line 3?   | N/A               |



June 27, 1986

Page Four

I hereby certify that the wording of this letter is identical to the wording specified in 40 CFR 264.151(g) as such regulations were constituted on the date shown immediately below.

A handwritten signature in dark ink, appearing to read "Alan J. Seelenfreund", is written over a horizontal line.

Alan J. Seelenfreund  
Vice President and Chief Financial Officer  
McKesson Corporation

June 27, 1986

AJS:sh



EPA REGION V

<u>Facility Address</u>	<u>EPA #</u>
Cincinnati - 3025 Exon Avenue Evendale, Cincinnati, OH 45241	#OHD002899847
Cleveland - 26601 Richmond Road Bedford Heights, OH 44146	#OHD071107791
Detroit - 27001 Trolley Industrial Drive Taylor, MI 48180	#MID010861524
Grand Rapids 7025 Dutton Industrial Drive Dutton, MI 49316	#MID980681696
Bloomington - 2010 N. Eagle Road Normal, IL 61761	#ILD000781633
Chicago Heights - P.O. Box 456 Chicago Heights, IL 60411	#ILD047029228
Milwaukee (West Allis) P.O. Box 14545 Milwaukee, WI 53214 1707 S. 101st Street West Allis, WI	#WID040784936
Minneapolis - 111 22nd Avenue, NE Minneapolis, MN 55418	#MND054497052
Schaumburg - 2055 Hammond Drive Schaumburg, IL 60195	#ILD000819938
633 East 138th Street Dolton, IL 60419	#ILD980613913

The Dolton facility listed above is operated by McKesson  
Envirosystems Company, a wholly-owned subsidiary of McKesson  
Corporation.

EXHIBIT "A"



## EPA REGION V

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
Cincinnati - 3025 Exon Avenue Evendale, Cincinnati, OH 45241	#OHD002899847	\$ 11,521
Cleveland - 26601 Richmond Road Bedford Heights, OH 44146	#OHD071107791	\$ 12,565
Detroit - 27001 Trolley Industrial Drive Taylor, MI 48180	#MID010861524	\$ 12,441
Grand Rapids 7025 Dutton Industrial Drive Dutton, MI 49316	#MID980681696	\$ 12,414
Bloomington 2010 N. Eagle Road Normal, IL 61761	#ILD000781633	\$ 15,828
Chicago Heights - P.O. Box 456 Chicago Heights, IL 60411	#ILD047029228	\$ 13,132
Milwaukee (West Allis) P.O. Box 14545 Milwaukee, WI 53214 1707 S. 101st Street West Allis, WI	#WID040784936	\$ 10,371
	carried over	\$ 88,272

EXHIBIT "B"



EPA REGION V CONTINUED

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
	brought forward	\$ 88,272
Schaumburg 2055 Hammond Drive Schaumburg, IL 60195	#ILD000819938	\$ 17,017
633 East 138th Street Dolton, IL 60419	#ILD980613913	\$ 131,000
111 22nd Avenue, NE Minneapolis, MN 55418	#MND054497052	<u>\$ 17,017</u>
		<u>\$ 253,306</u>

The Dolton facility listed above is operated by McKesson  
Envirosystems Company, a wholly-owned subsidiary of McKesson  
Corporation.

EXHIBIT "B"



EXHIBIT "C"



KENTUCKY

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
State Highway #146 P. O. Box 387 New Castle, KY 40050	#KYD053348108	\$255,000

The New Castle facility above is owned and operated by McKesson EnviroSystems Company, a California corporation and wholly-owned subsidiary of McKesson Corporation.



EXHIBIT "D"



## EPA REGION II

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
1. Woodbridge/Bulk Plant P.O. Drawer J Avenel, NJ 07001 160 Essex Avenue, East	#NJD063143754	\$ 1,182
2. 504-508 Doremus Avenue Newark, NJ	#NJD002153922	\$ 151,000
3. 400 Bear Street Syracuse, NY	#NYD075806836	\$ 63,000
4. KM #51, Highway #2 Post Office Box 298 Manati, Puerto Rico	#PRD090399718	\$ 354,000
5. KM #26.7, Highway #2 Dorado, Puerto Rico 00646 P.O. Box 1098 Manati, Puerto Rico 00701	#PRD981187421	\$ 75,000
	TOTAL	<u>\$ 644,182</u>

Facilities 2 and 3 above are owned and operated by McKesson EnviroSystems Company, a California corporation and wholly-owned subsidiary of McKesson Corporation. Facilities 4 and 5 are operated by McKesson EnviroSystems Company of Puerto Rico, Inc. which, in turn, is a wholly-owned subsidiary of McKesson EnviroSystems Company.



EPA REGION V

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
Cincinnati - 3025 Exon Avenue Evendale, Cincinnati, OH 45241	#OHD002899847	\$ 11,521
Cleveland - 26601 Richmond Road Bedford Heights, OH 44146	#OHD071107791	\$ 12,565
Detroit - 27001 Trolley Industrial Drive Taylor, MI 48180	#MID010861524	\$ 12,441
Grand Rapids 7025 Dutton Industrial Drive Dutton, MI 49316	#MID980681696	\$ 12,414
Bloomington 2010 N. Eagle Road Normal, IL 61761	#ILD000781633	\$ 15,828
Chicago Heights - P.O. Box 456 Chicago Heights, IL 60411	#ILD047029228	\$ 13,132
Milwaukee (West Allis) P.O. Box 14545 Milwaukee, WI 53214 1707 S. 101st Street West Allis, WI	#WID040784936	\$ 10,371
		<hr/> carried over \$ 88,272



EPA REGION V CONTINUED

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
	brought forward	\$ 88,272
Schaumburg 2055 Hammond Drive Schaumburg, IL 60195	#ILD000819938	\$ \$17,017
633 East 138th Street Dolton, IL 60419	#ILD980613913	\$ 131,000
111 22nd Avenue, NE Minneapolis, MN 55418	#MND054497052	<u>\$ 17,017</u>
		<u>\$ 253,306</u>

The Dolton facility listed above is operated by McKesson  
Envirosystems Company, a wholly-owned subsidiary of McKesson  
Corporation.



## EPA REGION VII

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
Kansas City - 2000 Guinotte Avenue Kansas City, MO 64120	MOD007158157	\$ 14,065
Omaha - P.O. Box 7341 3900 "D" Street Omaha, NE 68107	NED040906729	\$ 11,910
St. Louis (Berkeley - P.O. Box 5953 8925 Seeger Industrial Drive Berkeley, MO 63134	MOD084396985	\$ 12,070
Springfield - M.P.O. Box 670 220 S. Barnes Avenue Springfield, MO 65801	MOD000823229	\$ 15,090
Wichita - P.O. Box 2280 2041 N. Mosley Avenue Wichita, KS 67201	KSD000809715	\$ 11,709
Burlington - P.O. Box 159 Burlington, IA 52601 --Silver Street	IAT200010916	\$ 8,006
TOTAL:		\$ 72,850



# ARKANSAS

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
Little Rock - P.O. Box 826 Jacksonville, AR 72076	#ARD071245401	\$ 13,325
Fayetteville - 701 Government Road Fayetteville, AR 72701	#ARD000709253	\$ 6,897
		<hr/>
	TOTAL	\$ 20,222



# CALIFORNIA

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
Los Angeles Branch 5353 Jillson Street Los Angeles, CA 90040	#CAD020745246	\$ 14,398
Bulk Plant 9005 Sorensen Avenue Santa Fe Springs, CA 90670	#CAD060395753	\$ 10,720
S.F. Bay Branch 33950 7th Street Union City, CA 94587	#CAD073934903	\$ 26,004
TOTAL:		<u>\$ 51,122</u>

Region IX of the USEPA says to continue to direct the financial assurance letter to the CA DHS, despite the EPA's having withdrawn California's authorization.



FLORIDA

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
Route 3, Box 498A Tampa, FL 33619	#FLD020985727	\$ 11,153
		<hr/>
	TOTAL	\$ 11,153



GEORGIA

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
2180 Irvindale Drive Chamblee Atlanta, GA 30366	#GAD072472707	\$ 9,769
Columbia Nitrogen Drive Augusta, GA 30903	#GAD000828269	\$ 10,090
		<hr/>
	TOTAL	\$ 19,859



# ILLINOIS

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
Bloomington 2010 N. Eagle Road Normal, IL 61761	#ILD000781633	\$ 15,828
Chicago Heights P.O. Box 456 Chicago Heights, IL 60411	#ILD047029228	\$ 13,132
Schaumburg 2055 Hammond Drive Schaumburg, IL 60195	#ILD000819938	\$ 11,454
633 East 138th Street Dolton, IL 60419	#ILD980613913	\$ 136,000
	TOTAL:	\$ 176,414

The Dolton facility listed above is operated by McKesson EnviroSystems Company, a wholly-owned subsidiary of McKesson Corporation.



KANSAS

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
Wichita - P.O. Box 2280 2041 N. Mosley Avenue Wichita, KS 67201	KSD000809715	\$ 11,709
		<hr/>
	TOTAL:	\$ 11,709



# KENTUCKY

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
Louisville P. O. Box 19409 Louisville, KY 40219	#KYD042593368	\$ 12,154
State Highway #146 P. O. Box 387 New Castle, KY 40050	#KYD053348108	\$255,000
		<hr/>
	TOTAL	267,154

The New Castle facility above is owned and operated by McKesson EnviroSystems Company, a California corporation and wholly-owned subsidiary of McKesson Corporation.



MICHIGAN

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
1. Detroit - 27001 Trolley Industrial drive Taylor, Michigan 48180	#MID010861524	\$ 12,441
2. Grand Rapids 7025 Dutton Industrial Drive Dutton, Michigan	#MID980681696	\$ 12,414
	TOTAL	<u>\$ 24,855</u>



MINNESOTA

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
111 - 22nd Avenue, N.E. Minneapolis, Minnesota 55418	MND0544987052	\$ 17,017



MISSOURI

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
Kansas City - 2000 Guinotte Avenue Kansas City, MO 64120	MOD007158157	\$ 14,065
St. Louis (Berkeley - P.O. Box 5953 8925 Seeger Industrial Drive Berkeley, MO 63134	MOD084396985	\$ 12,070
Springfield - M.P.O. Box 670 220 S. Barnes Avenue Springfield, MO 65801	MOD000823229	\$ 15,090
		<hr/>
TOTAL:		\$ 41,225



OREGON

Facility Address

EPA #

Closure/Post-Closure  
Cost Estimates

4488 N.W. Yeon  
Portland, Oregon

#ORD049799232

\$ 10,115



NEBRASKA

Facility Address

EPA #

Closure/Post-Closure  
Cost Estimates

Omaha - P.O. Box 7341  
3900 "D" Street  
Omaha, NE 68107

NED040906729

\$ 11,910

TOTAL:

\$ 11,910



NEW MEXICO

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
Albuquerque Stockpoint 121 Dale Avenue Albuquerque, NM 87102	#NMD080370785	\$ 18,164
		<hr/>
	TOTAL:	\$ 18,164



NORTH CAROLINA

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
Wendover Avenue Greensboro, NC 27420	#NCD089903983	\$ 10,002
4901 Brookshire Blvd. Charlotte, NC 28208	#NCD024481848	\$ 9,777
		<hr/>
	TOTAL	\$ 19,779



OHIO

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
1. 3025 Exon Avenue Evendale Cincinnati, Ohio 45241	#OHD002899847	\$ 11,521
2. Cleveland 26601 Richmond Road Bedford Heights, Ohio 44146	#OHD071107791	\$ 12,565
		<u>\$ 24,086</u>



SOUTH CAROLINA

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
Camp Croft Industrial Park Spartanburg, SC 29302	#SCD008941619	\$ 16,019
		<hr/>
	TOTAL	\$ 16,019



TENNESSEE

<u>Facility Address</u>	<u>EPA #</u>	<u>Closure/Post-Closure Cost Estimates</u>
Memphis - 3909 Outland Road Memphis, TN 38118	#TND096074901	\$ 12,209
Ridgefield's Industrial Park Kingsport, TN 37662	#TND000822973	\$ 18,460
One Riverside Lane Chattanooga, TN 37421	#TND000737445	\$ 17,001
	TOTAL	<hr/> \$ 47,670



TEXAS

Facility Address

EPA #

Closure/Post-Closure  
Cost Estimates

Houston Branch  
6012 Murphy Street  
Houston, TX 77031

TXD039822432

\$ 30,523



# Deloitte Haskins Sells

44 Montgomery Street  
San Francisco, California 94104-4602  
(415) 398-4300  
Telex 340336

McKesson Corporation:

June 27, 1986

We have examined the consolidated financial statements of McKesson Corporation for the year ended March 31, 1986, and have issued our opinion thereon dated May 23, 1986. Our examination was made in accordance with generally accepted auditing standards and, accordingly, included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances. We have not performed any auditing procedures beyond the date of our opinion on the consolidated financial statements; accordingly, this letter is based on our knowledge as of that date and should be read with that understanding.

At your request, we have performed the procedures described below with respect to the accompanying letter dated June 27, 1986 from Mr. Alan J. Seelenfreund, Vice President and Chief Financial Officer, McKesson Corporation. It is understood that this report is solely for filing with the agencies listed in the Appendix to this letter in accordance with requirements of Subpart H of 40 CFR Parts 264 and 265 or similar state requirements, and is not to be used for any other purpose. The procedures that we performed are summarized as follows:

We recomputed from, or reconciled to, the consolidated financial statements referred to in the first paragraph the information included in items 7, 8 and 11 under the caption Alternative II in the letter referred to above.

Because the procedures referred to in the preceding paragraph were not sufficient to constitute an examination made in accordance with generally accepted auditing standards, we do not express an opinion on any of the information or amounts listed under the caption Alternative II in the aforementioned letter. In performing the procedures referred to above, however, no matters came to our attention that caused us to believe that the information or amounts included in items 7, 8 and 11 should be adjusted.

Yours truly,

*Deloitte Haskins & Sells*



## APPENDIX

Agencies receiving filings dated June 27, 1986 from  
Mr. Alan J. Seelenfreund, Vice President and Chief Financial  
Officer of McKesson Corporation, in accordance with Subpart H  
of 40 CFR Parts 264 and 265 or similar state requirements:

Environmental Protection Agency, Region II  
Environmental Protection Agency, Region V  
Environmental Protection Agency, Region VII  
Arkansas Department of Pollution Control and Ecology  
California Department of Health Sciences,  
    Toxic Substances Control Division  
Florida Department of Environmental Regulation  
Georgia Department of Natural Resources,  
    Environmental Protection Division  
Illinois Environmental Protection Agency  
Kansas Department of Health and Environment,  
    Bureau of Waste Management  
Michigan Department of Natural Resources,  
    Hazardous Waste Division  
Minnesota Pollution Control Agency,  
    Solid and Hazardous Waste Division  
Nebraska Department of Environmental Control,  
    Hazardous Waste Section  
New Mexico Environmental Improvement Division  
North Carolina Department of Human Resources  
Ohio Environmental Protection Agency  
Oregon Department of Environmental Quality, Hazardous and  
    Solid Waste Division  
South Carolina Department of Health and Environmental  
    Control, Bureau of Solid and Hazardous Waste Management  
Tennessee Department of Health and Environment  
Texas Water Commission, Hazardous Waste and Solid Waste  
    Division



## RESPONSIBILITY FOR FINANCIAL STATEMENTS

McKesson Corporation is responsible for the preparation and accuracy of the financial statements and other information included in this report. The financial statements have been prepared in conformity with generally accepted accounting principles using, where appropriate, management's best estimates and judgments.

In meeting its responsibility for the reliability of the financial statements, the company depends on its system of internal accounting control. The system is designed to provide reasonable assurance that assets are safeguarded and that transactions are executed as authorized and are properly recorded. The system is augmented by written policies and procedures and an internal audit department.

Deloitte Haskins & Sells, the company's independent auditors, have examined the financial statements in accordance with generally accepted auditing standards, and their opinion appears to the right.

The Board of Directors reviews the financial statements and reporting practices of the company through its Audit Committee, which is composed entirely of directors who are not officers or employees of the company. The committee meets regularly with the independent auditors, internal auditors and management to discuss audit scope and results and to consider internal control and financial reporting matters. Both the independent and internal auditors have unrestricted access to the Audit Committee.



Neil E. Harlan  
Chairman and  
Chief Executive Officer



Alan Seelenfreund  
Vice President and  
Chief Financial Officer

## Opinion of Independent Auditors

**Deloitte  
Haskins-Sells**

The Stockholders and Board of Directors  
of McKesson Corporation:

We have examined the consolidated balance sheets of McKesson Corporation and subsidiaries as of March 31, 1986, 1985 and 1984 and the related statements of consolidated income, changes in consolidated stockholders' equity and changes in consolidated financial position for the years then ended. Our examinations were made in accordance with generally accepted auditing standards and, accordingly, included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

In our opinion, such consolidated financial statements present fairly the financial position of the companies at March 31, 1986, 1985 and 1984 and the results of their operations and the changes in their financial position for the years then ended, in conformity with generally accepted accounting principles applied on a consistent basis.

*Deloitte Haskins & Sells*

San Francisco, California 94104  
May 23, 1986



**C.2 Compliance/  
Enforcement**



MAY 16 1988

Mr. John Pesek  
Production Manager  
McKesson Chemical  
(Van Waters & Rogers, Inc.)  
2055 Hammond Drive  
Schaumburg, Illinois 60173

Re: McKesson Chemical  
(Van Waters & Rogers, Inc.)  
ILD 000 819 938

Dear Mr. Pesek:

The United States Environmental Protection Agency has reviewed the information which you submitted to this office on April 20, 1988. The stated actions appear to adequately address the land disposal restriction deficiency outlined in our April 12, 1988, Notice of Violation.

Your cooperation and efforts in this matter are appreciated. Should you have further questions, please feel free to contact Ms. Barbara Russell of my staff at (312) 353-7922.

Sincerely yours,

Paul E. Dimock, Chief  
IL/MI/WI Enforcement Programs Section

cc: Glenn Savage, IEPA, FOS  
Harry Chappel, IEPA, CMS

5HS-12:BRUSSELL:5/2/88:ev

DISK #4

## CONCURRENCES

SYMBOL							
SURNAME	O.R.	B.R.		P.E.D.			
DATE	5/10/88	5/13/88		5-13-88			





217/782-6761

Refer to: 0314890001 -- Cook County  
Van Waters & Rogers, Inc.  
ILD0000819938  
RCRA - Permits

May 6, 1988

Van Waters & Rogers, Inc.  
2055 Hammond Dr.  
Schaumburg, Illinois 60195

Attn: Environmental Coordinator or  
Plant Manager

Dear Sir:

According to Agency files, your facility currently manages hazardous waste in containers and/or tanks subject to the requirements of 35 IAC 700-725. 35 IAC 703.157(f) states that interim status for any hazardous waste storage or treatment facility will be terminated November 8, 1992, unless the facility submits Part B of the RCRA permit application for these units to this Agency by November 8, 1988. This letter is written to (1) make you aware of this requirement and (2) describe the actions which must be taken in response to this requirement.

According to 35 IAC 703.157(f), if an existing facility desires to (1) store hazardous waste on-site for greater than ninety (90) days, (2) treat hazardous waste, or (3) store hazardous waste as a commercial facility after November 8, 1992, it must submit Part B of the RCRA permit application to this Agency by November 8, 1988. The information which must be contained in this application is described in 35 IAC 703, Subpart D. The enclosed document, entitled "RCRA Permit Guidance" provides more detail regarding the necessary contents of the application and also identifies several guidance documents which will be useful in developing the application. Also included in this document is the form which must be used when submitting the application.

If a facility does not desire to continue storing and/or treating hazardous waste after November 8, 1992, it must close the storage and/or treatment unit(s) present at the facility prior to this date. Closure, in this instance, basically means that all contamination must be removed from the unit(s) and if necessary, from the area surrounding these units. The requirements which must be met in closing these units are contained in 35 IAC 725, Subpart E. For your convenience, guidance for the development of a closure plan is contained in the enclosed document entitled "Instructions for the Preparation of Closure Plans for Interim Status RCRA Hazardous Waste Facilities." PLEASE NOTE THAT A CLOSURE PLAN DOES NOT NEED TO BE SUBMITTED AT THIS TIME. IT MUST HOWEVER, BE SUBMITTED TO THE AGENCY NO LATER THAN MAY 8, 1992.





Page 2

In some instances, there may be several interim status hazardous waste management units at a facility. The facility may desire to pursue a final RCRA permit for a portion of these units and close the rest of them. Because of the uncertainty associated with this option, all interim status units at a facility must be included in Part B of the RCRA permit application, unless a closure plan for the units being closed is submitted with the Part B. If a closure plan is submitted with the Part B, the application need only address those units which will remain in operation.

The only alternatives available for hazardous waste treatment and storage facilities to meet the requirements of 35 IAC 703.157(f) are (1) submit Part B of the RCRA permit application by November 8, 1988 or (2) close by November 8, 1992. However, some facilities may have previously filed Part A of the RCRA permit application in error and now feel that the hazardous waste management activities carried out at the facility do not require a RCRA permit (i.e. the Part A was filed for protective measures). If this is the case, the Agency requests that information supporting this position be submitted no later than November 8, 1988. The Agency can then review the information submitted and correct its records accordingly. The information which must be submitted to make this demonstration is contained in the enclosed document entitled "Facility Part A Withdrawal Request Form."

Finally, some facilities may have closed or are currently closing in accordance with an IEPA approved closure plan. (Please bear in mind this letter is going out to over 200 facilities; some closed facilities may inadvertently receive this letter.) In this instance, the Agency requests that a copy of (1) the closure plan approval letter and (2) the letter from the Agency accepting the certifications of the owner/operator and the registered professional engineer that closure was carried out in accordance with the approved closure plan (if closure has been completed) be submitted by November 8, 1988. The Agency will again be able to review this information and correct its records accordingly.

Because of the large number of facilities subject to the requirements of 35 IAC 703.157(f), the Agency requests that all facilities receiving this letter complete the enclosed form entitled "RCRA Permit Information Form." The form has been developed such that it can be used by a facility falling into any of the five categories described above (pursuing a final permit, planning to close, pursuing a permit for only a portion of the interim status units and closing the other units, protective filers, closed in accordance with an IEPA approved closure plan). This form must be submitted to the Agency no later than November 8, 1988, along with all required attachments. Failure to do so may subject a facility to enforcement under State and/or Federal regulations and possible monetary penalties up to \$25,000 per day of noncompliance.





Page 3

The RCRA Permit Information Form and all required attachments must be submitted in triplicate (original and two (2) copies) to the following address:

Permit Section, RCRA Unit  
Division of Land Pollution Control  
Illinois Environmental Protection Agency  
2200 Churchill Road  
P.O. Box 19276  
Springfield, IL 62794-9276

If you have any questions regarding this letter, please contact Jim Moore at 217/782-9875.

Very truly yours,

Lawrence W. Eastep, P.E., Manager  
Permit Section  
Division of Land Pollution Control

LWE:JKM:rd1313j/1314j

Enclosures

cc: Division File  
Compliance  
Maywood Region  
USEPA Region V



# Van Waters & Rogers Inc.

subsiidiary of **Univar**  
CERTIFIED MAIL #P579-107-273  
RETURN RECEIPT REQUESTED

600 HUNTER DRIVE  
OAK BROOK, IL 60521  
PHONE (312) 573-4300

April 20, 1988

Mr. Paul E. Dimock, Chief  
IL/MI/WI Enforcement Program Section  
U. S. Environmental Protection Agency  
Region 5  
230 South Dearborn Street  
Chicago, IL 60604

RECEIVED  
APR 25 1988

U.S. EPA, REGION V  
WASTE MANAGEMENT DIVISION  
OFFICE OF THE DIRECTOR

RE: Van Waters & Rogers Inc.  
Notice of Violation  
ILD 000 819 938

Dear Mr. Dimock:

This is in response to your Notice of Violation issued as a result of a February 18, 1988 inspection conducted at above referenced facility.

Our failure to mark the waste drums with the date received was purely an oversight and has been corrected.

All drums of F-Solvent wastes accepted for storage at our facilities are now being marked with the date received into storage.

All drums are properly labeled to show contents and the accumulation start date.

A pre-pickup checklist is used by our drivers to assure that labeling is complete and routine in-house inspections are conducted to assure us that labels remain on the drums during storage.

Copies of these checklists are attached for your information.

Very truly yours,

  
Robert D. Hickman  
Regional Regulatory Manager

RDH:be

Attachments

COPIES TO: J. F. Lacey  
M. S. Kirkland  
J. Tobin  
D. Costello  
File



# CHEMCARE

## HAZARDOUS WASTE CHECKLIST

This checklist has been provided to assist you in working with Van Waters & Rogers, Inc. in the handling and treatment of your hazardous waste.

- \_\_\_\_\_ Federal EPA ID #
- \_\_\_\_\_ Generator's State EPA/DNR ID # (if required)
- \_\_\_\_\_ Ship to State's Generator ID #
- \_\_\_\_\_ Ship to State's Generator Waste Stream #
- \_\_\_\_\_ Waste Survey completed and signed
- \_\_\_\_\_ Representative 1 pint/quart sample taken and prepared for shipment
- \_\_\_\_\_ Sample & Survey sent to TSDF Laboratory for approval
- \_\_\_\_\_ Receipt of TSDF Approval (analysis), VW & R Quotation, Terms & Conditions, and the Handling Agreement (fascimile)

## DRUM CHECKLIST

- \_\_\_\_\_ Use 17E or 17H Drums, clean and in good condition
- \_\_\_\_\_ HAZARDOUS WASTE LABEL (printed or typed) for each drum with:
  - \_\_\_\_\_ DOT Shipping Name
  - \_\_\_\_\_ Generator Name and Address
  - \_\_\_\_\_ EPA GENERATOR ID #
  - \_\_\_\_\_ Manifest Document #
  - \_\_\_\_\_ UN or NA #
  - \_\_\_\_\_ Accumulation start date
  - \_\_\_\_\_ EPA WASTE # (F000# or D000#)
- \_\_\_\_\_ No side bungs
- \_\_\_\_\_ Must be sealed with no apparent leaks
- \_\_\_\_\_ All other wording and labels must be obliterated
- \_\_\_\_\_ No creases
- \_\_\_\_\_ Minimum rust
- \_\_\_\_\_ All appropriate DOT Labels (ie. flammables)
- \_\_\_\_\_ No open top drums (by exception)
- \_\_\_\_\_ Must be filled within 4" - 6" of the top (by exception)

## PREPARATION FOR SHIPMENT

- \_\_\_\_\_ A copy of completed Hazardous Waste Manifest is sent to VW & R
- \_\_\_\_\_ Call from VW & R with pick up date
- \_\_\_\_\_ Hazardous Waste Manifest, Handling Agreements, and Restricted Waste Notification Statement signed
- \_\_\_\_\_ Delivery to TSDF



Table 1

Van Waters &amp; Rogers, Inc.

Inspection Schedule  
(To be kept at Facility)

<u>Area/Equipment</u>	<u>Specific Items</u>	<u>Types of Problems</u>	<u>Frequency of Inspection</u>
<u>Container Storage Area</u> (Secondary Containment)	General Area	Leaks, spills	Daily
	Container placement and stacking	Aisle space	Weekly
	Sealing of containers	Open bungs, lids	Weekly
	Labelling of containers	Improper identification Date missing illegibility	Weekly
	Base	Cracks, erosion	Daily
	Berm	Cracks, deterioration	Daily
	Warning signs	Damaged	Weekly
	Debris & refuse	Aesthetics	Weekly
	Accumulated liquid	Contamination	Daily, and confirm after precipitation
<u>Security Devices</u>	Facility fence	Corrosion, damage	Weekly
	Main Gate	Corrosion, damage, non-functioning	Weekly
<u>Loading, Unloading Areas</u>	Surface areas	Deterioration spills	Daily
	Dock bumpers	Damage	Daily

Revised

DEC 22 1995



APR 12 1988

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Mr. John Pesek  
McKesson Chemical Company  
(Van Waters & Rogers, Inc.)  
2055 Hammond Drive  
Schaumburg, Illinois 60173

Re: Notice of Violation  
McKesson Chemical Company  
(Van Waters & Rogers, Inc.)  
ILD 000 819 938

Dear Mr. Pesek:

On February 18, 1988, the Illinois Environmental Protection Agency (IEPA), representing the U.S. Environmental Protection Agency (U.S. EPA), conducted a Resource Conservation and Recovery Act (RCRA) inspection of the above-referenced facility. The purpose of the inspection was to determine the compliance status of your facility with respect to the applicable hazardous waste management requirements of RCRA, including the Federal land disposal restrictions. The land disposal restrictions for F001-F005 waste solvents became effective on November 8, 1986, (reference 51 Federal Register 40636: revisions to 40 CFR Parts 260-265, 268, and 270-271) and for "California List" hazardous wastes on July 8, 1987, (reference 52 Federal register 25760: revisions to 40 CFR Parts 262, 264, 265, 268, and 270-271).

With respect to the land disposal restrictions (40 CFR Part 268) section of the inspection, your facility was found to be in violation of the following:

Failure to identify contents and mark dates on all containers entering storage, as required by Section 268.50(a)(2)(i).

A copy of the inspection report is enclosed for your records. Please submit to this office, within thirty (30) days of receipt of this Notice of Violation, documentation demonstrating that the above-cited violation has been corrected



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

and indicating what measures have been initiated to assure future compliance. Failure to correct the violation may subject the facility to further Federal enforcement action.

If you have any questions regarding this correspondence, please contact Ms. Barbara Russell of my staff at (312) 353-7922.

Sincerely yours,

Paul E. Dimock, Chief  
IL/MI/WI Enforcement Program Section

Enclosure

cc: Harry Chappel, IEPA  
Glenn Savage, IEPA

CONCURRENCES

SYMBOL							
SURNAME	O-R	BR	DRN 4/12/88				
DATE	4/7/88	4/12/88	4/12/88				



**SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☒ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery  
↑(Extra charge)↑ ↑(Extra charge)↑

3. Article Addressed to:  
*Mr. John Pesek*  
*McKesson Chemical Co. Inc.*  
*(Van Waters & Rogers, Inc.)*  
*2055 Hammond Drive*  
*Schaumburg, IL 60173*

4. Article Number  
*P 571 916 685*

Type of Service:  
☐ Registered ☐ Insured  
☒ Certified ☐ COD  
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee  
*X Jane Pesek*

6. Signature - Agent  
*X*

7. Date of Delivery  
*4-15-85*

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1987 \* U.S.G.P.O. 1987-178-268 DOMESTIC RETURN RECEIPT

P-571 916 685

**RECEIPT FOR CERTIFIED MAIL**  
 NO INSURANCE COVERAGE PROVIDED  
 NOT FOR INTERNATIONAL MAIL  
 (See Reverse)

U.S.G.P.O. 153-506

Sent to  
*Mr. John Pesek*

Street and No.  
*2055 Hammond Drive*

City, State and ZIP Code  
*Schaumburg, IL 60173*

Postage	\$ <i>85</i>
Certified Fee	<i>85</i>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	<i>90</i>
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ <i>2.60</i>
Postmark or Date	

PS Form 3800, June 1985

*Barbara Russell (545-12)*

APR 15 1985  
 ST. LOUIS, MO.



RECEIVED

MAR 14 1986

SWD - HIS  
U.S. EPA, REGION V

McKesson

February 28, 1986

Mr. D. A. Stringham  
U.S. EPA, Region V  
230 South Dearborn Street  
Chicago, IL 60604

RECEIVED

MAR 14 1986

SOLID WASTE BRANCH  
U.S. EPA, REGION V

RE: McKesson Chemical Facility  
2055 Hammond Drive  
Schaumburg, IL  
**ILD000819938**

Dear Mr. Stringham:

This will acknowledge receipt of the information request directed to our facility located at the subject address.

We are presently reviewing our RCRA files on this subject and compiling information requested in your letter. Since we have many locations in different areas of the country, it is important to us to develop a consistent approach to these information requests.

Accordingly, we request that the response deadline for this request be extended by 30 days.

Thank you for your cooperation.

Very truly yours,

McKESSON CHEMICAL COMPANY

*R. Hickman*

Robert D. Hickman  
Regional Compliance Manager

RDH:be

*Verbally answered  
(per J Mayka)*



Foremost-McKesson  
Chemical Group  
McKesson Chemical Company  
2055 Hammond Dr.  
Schaumburg, IL 60195  
312 397-2710

RECEIVED

MAY 12 1982

ILL. E.P.A. - D.L.P.C.  
STATE OF ILLINOIS



May 11, 1982

Environmental Protection Agency  
1701 S. First Street  
Maywood, IL 60153

Attention : Kenneth P. Bechley, Northern Region Manager  
Field Operations Section Division of Land  
Pollution Control

Dear Mr. Bechley:

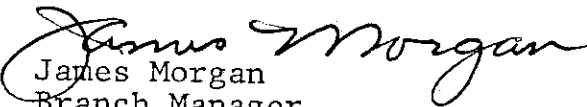
We have corrected the deficiencies noted in your letter of May 7, 1982 in reference to your inspection of our facility on March 24, 1982.

The same day of the inspection we recorded the home address and telephone numbers of the employees designated as emergency coordinators.

In accordance with 40 CFR 265.53 (b) we will present copies of our contingency plan to the local fire department and police department by the week of May 17, 1982.

Sincerely,

MCKESSON CHEMICAL COMPANY

  
James Morgan  
Branch Manager

JM/Gb

cc: Mr. A. W. Knapp

Reference: 03148901 - Cook County - Schaumburg/McKesson  
Chemical - ILD000819938







# Environmental Protection Agency

1701 S. First Street Maywood, IL. 60153

771

312/345-9780

Refer to: 03148901 - Cook County - Schaumburg/McKesson Chemical  
ILD000819938

May 7, 1982

Mr. Daniel Gallagher  
McKesson Chemical Company  
2055 Hammond Drive  
Schaumburg, Illinois 60193

Mr. A.W. Knapp  
Formost-McKesson, Inc.  
1 Post Street  
San Francisco, Ca. 94104

Dear Mr. Gallagher:

On March 24, 1982, representatives of the Illinois Environmental Protection Agency (IEPA) conducted an inspection of McKesson Chemical Company in Schaumburg, Illinois. This inspection was conducted by the Illinois Environmental Protection Agency under a Cooperative Arrangement with, and authorization of, the United States Environmental Protection Agency (USEPA). The purpose of the inspection was to determine your facility's compliance status with the Resource Conservation and Recovery Act (RCRA) of 1976, P.L. 94-580, as amended. During the inspection the following deficiencies were observed:

Pursuant to 40 CFR 265.15(b) the owner/operator is to establish and maintain inspection records and schedules which detail records of malfunctions, operator errors, discharges, safety and emergency equipment, security devices, and operating and structural devices. Your facility is deficient in that no records of malfunctions, operator error or discharges are maintained for review.

The owner/operator must have a contingency plan at the facility. The contingency plan must address the actions to be taken by facility personnel in response to fires, explosions, or any unplanned release of hazardous waste or hazardous constituents to the environment. The plan must describe the arrangements agreed to by local police, fire departments, hospitals and emergency response teams. The names, addresses, and phone numbers of all persons qualified to act as emergency coordinators must be included in the plan. The contingency plan must list all emergency equipment at the facility, including the location, a physical description, and a brief summary of the capabilities of each item on the list. In facilities where evacuation could be necessary a plan describing evacuation routes and signals used to begin evacuation must be included in the contingency plan. These requirements are pursuant to 40 CFR Part 265 Subpart D. Your facility is deficient in that the contingency plan did not contain the home addresses and phone numbers of those employees designated as emergency coordinators.



Requirements contained in 40 CFR 265.53(b) were not complied with in that copies of the contingency plan were not submitted to local emergency response organizations.

You are hereby requested to submit to this office, within 15 days of receipt of this letter, a description of steps taken to correct the above deficiencies. Failure to correct these deficiencies may result in enforcement actions initiated by USEPA pursuant to 40 USC 6928. Please send your reply to the above address. Should you have any questions concerning this matter, please contact Glenn Starnard of my staff at the above number.

Sincerely,



Kenneth P. Bechely, Northern Region Manager  
Field Operations Section  
Division of Land Pollution Control

KPB:GJS:prb

Enclosure: Inspection Report

cc: Division File  
Northern Region  
U.S. E.P.A. - Region V



L P C F C O 5 5 C  
(1) (8) (9)

## OBSERVATION REPORT - SITE INVENTORY NO. 03148901

(11)

(18)

CO. - L.P.C.

Region # N

Date 03/20/92  
(20) (25)Letter Sent (Yes or No) Yes  
(26)

(Location)

(Responsible Party)

Samples Taken: Yes ( ) No ( ) Time: From 09 : 30 a m

Ground Water ( ) Surface ( ) Other ( ) To 11 : 30 a m

Photos Taken: Yes ( ) No ( ) Interviewed Morgan

Weather 50° Sunny  
Inspector G I S  
(27) (29)

Previous Inspection Previous Correspondence

Site Open: Yes ( ) No ( )

## OPERATIONAL STATUS:

## TYPE OF OPERATION:

## AUTHORIZATION:

Operating ( )	Landfill ( )	Storage ( )	E.P.A. Permit ( )
Temporarily Closed ( )	Random Dump ( )	Salvage ( )	Variance ( )
Closed Not Covered ( )	Other <u>STORE</u> ( )	A.C.D. ( )	21(e) ( )
Closed and Covered ( )	Quantity Received Daily(1-6) <u>1</u>		Board Order ( )
	(30)		Illegal (5) ( )

(31)

IMPROVED

LPC 4 1/79 5,000

SAME

DETERIORATED

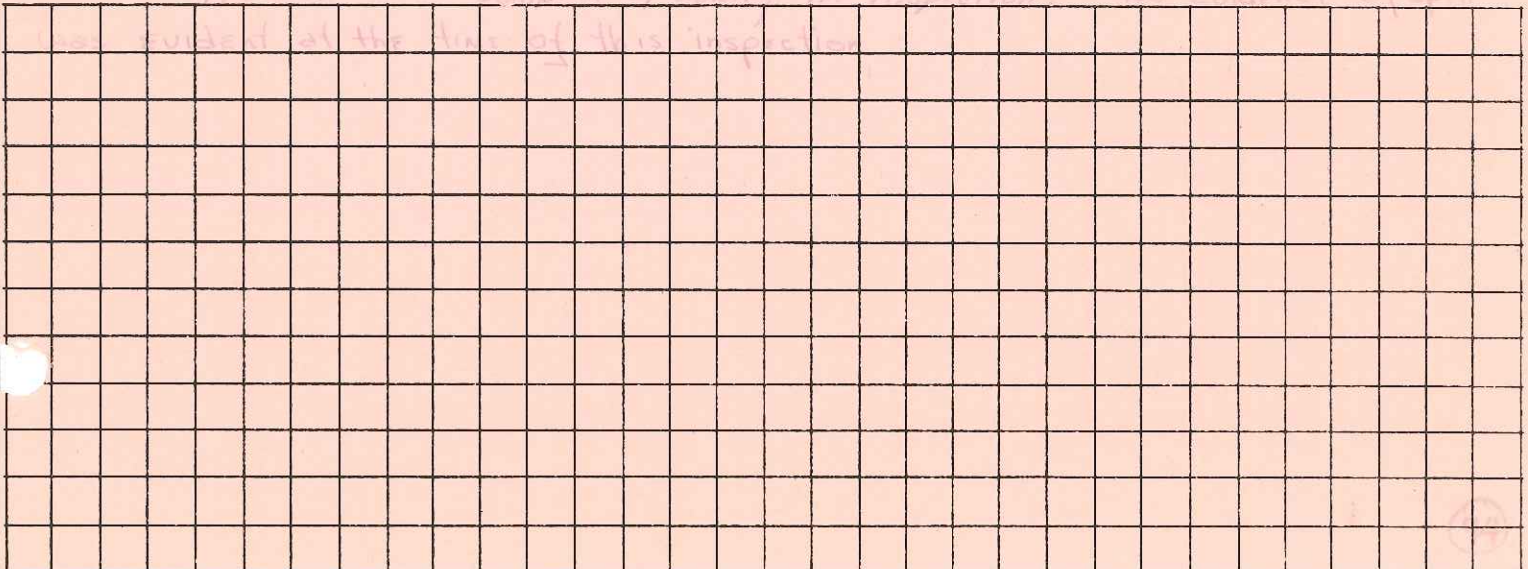
I S or D S  
(62)

GENERAL REMARKS: This Mc Kesson Chemical Co. facility's basic site activity is that of warehouse/distribution of Mc Kesson chemical products. Its classification as a hazardous waste facility results from the fact that this site accepts spent solvent from its customers. The site then stores the solvents until it is shipped for recycling at another Mc Kesson facility. The site is also considered a generator and therefore must complete a new manifest for the waste shipped. The USEPA H.W. # for the wastes are

INTERVIEW: F001, F003 F005. The wastes are all stored in 55 gal drums in an outside fenced-in storage pad concrete based. The H.W. is stored in the NE corner of the site. The remainder of the pad is used for virgin material storage.

The site was deficient in the following requirements - 1) Operator Inspections no records of malfunctions, operator error, discharges 2) Spill response plan was lacking home phone & address of Emerg. Coordinator. No evacuation plan 3) Contingency plan not on file w/ local FR teams. All other requirements

DIAGRAM: appears to be completed w/ during the inspection. No evidence of soil





0314 8901  
STATE IDENTIFICATION NUMBER  
(If Applicable)

ILD000819938  
EPA IDENTIFICATION NUMBER

RCRA INSPECTION REPORT - INTERIM STATUS STANDARDS  
TREATMENT, STORAGE, AND DISPOSAL FACILITIES  
Form A - General Facility Standards

I. General Information:

(A) Facility Name: McKesson Chemical Co  
(B) Street: 2055 HAMMOND DR  
(C) City: Schaumburg (D) State: IL (E) Zip Code: 60193  
(F) Phone: (312) 254-1100 (G) County: COOK  
(H) Operator: SAME AS ABOVE  
(I) Street: \_\_\_\_\_  
(J) City: \_\_\_\_\_ (K) State: \_\_\_\_\_ (L) Zip Code: \_\_\_\_\_  
(M) Phone: \_\_\_\_\_ (N) County: \_\_\_\_\_  
(O) Owner: Foremost - McKesson, Inc.  
(P) Street: 1 Post St.  
(Q) City: SAN FRANCISCO (R) State: CA (S) Zip Code: 94104  
(T) Phone: 415-983-9160 (U) County: Alameda  
(V) Date of Inspection: 3-24-82 (W) Time of Inspection (From) 9:30A (To) 11:20A  
(X) Weather Conditions: 50° Sunny

Rev. 3-6-81/J.B.

Inspection report consists of pgs 1-10 and 19-24 of Form A.  
(inclusive)  
pgs 11-18 N/A



(Y)	Person(s) Interviewed	Title	Telephone
	<u>William J. McCANDLESS</u>	<u>Op. Manager</u>	<u>(312) 397-2710</u>
	<u>DANIEL GALLAGHER</u>	<u>Admin. Mgr</u>	<u>" "</u>
	<u>J. Morgan</u>	<u>-Mgr.</u>	<u>" "</u>
(Z)	Inspection Participants	Agency/Title	Telephone
	<u>Glenn J. Starnard</u>	<u>EPA/EPs</u>	<u>(312) 345-9780</u>
(AA)	Preparer Information		
	Name <u>Glenn STARNARD</u>	Agency/Title <u>EPA EPS</u>	Telephone <u>(312) 345-9780</u>

## II. SITE ACTIVITY:

Complete sections I through VII for all treatment, storage, and/or disposal facilities. Complete the forms (in parenthesis) in section VIII corresponding to the site activities identified below:

- |   |  |
|---|--|
| <p><input checked="" type="checkbox"/> A. Storage and/or Treatment</p> <p style="margin-left: 20px;">1. Containers (I)</p> <p style="margin-left: 20px;">2. Tanks (J)</p> <p style="margin-left: 20px;">3. Surface Impoundments (K)</p> <p style="margin-left: 20px;">4. Waste Piles (L)</p> <p><input type="checkbox"/> B. Land Treatment (M)</p> <p><input type="checkbox"/> C. Landfills (N)</p> | <p><input type="checkbox"/> D. Incineration and/or Thermal Treatment (O and P)</p> <p><input type="checkbox"/> E. Chemical, Physical, and Biological Treatment (Q)</p> |
|---|--|

Note: If facility is also a generator or transporter of hazardous waste complete sections IX and X of this form as appropriate.



III. GENERAL FACILITY STANDARDS:  
(Part 265 Subpart B)

	Yes	No	NI*	Remark
(A) Has the Regional Administrator been notified regarding:				
1. Receipt of hazardous waste from a foreign source?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>NO WASTE REC'D</u>
2. Facility expansion?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>NO EXPANSION PRESENTLY Contemplated.</u>
(B) General Waste Analysis:				
1. Has the owner or operator obtained a detailed chemical and physical analysis of the waste?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Does the owner or operator have a detailed waste analysis plan on file at the facility?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Does the waste analysis plan specify procedures for inspection and analysis of each movement of hazardous waste from off-site?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(C) Security - Do security measures include: (if applicable)				
1. 24-Hour surveillance?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Artificial or natural barrier around facility?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Controlled entry?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Danger sign(s) at entrance?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(D) Do Owner or Operator Inspections Include:				
1. Records of malfunctions?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Records of operator error?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Records of discharges?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

\*Not Inspected



..I. GENERAL FACILITY STANDARDS Continued

	Yes	No	NI*	Remarks
4. Inspection schedule?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Safety, emergency equipment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Quarterly inspection
6. Security devices?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Operating and structural devices?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Inspection log?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(E) Do personnel training records include: (Effective 5/19/81)				
1. Job titles?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Job descriptions?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Description of training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Records of training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Have facility personnel received required training by 5-19-81?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Do new personnel receive required training within six months?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ANNUAL REVIEW
(F) If required are the following special requirements for ignitable, reactive, or incompatible wastes addressed?				
1. Special handling?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. No smoking signs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Separation and protection from ignition sources?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No ignition sources located near storage

\*Not Inspected



IV. PREPAREDNESS AND PREVENTION:  
(Part 265 Subpart C)

(A) Maintenance and Operation  
of Facility:

Is there any evidence of fire,  
explosion, or release of  
hazardous waste or hazardous  
waste constituent?

Yes No NI\* Remarks

— ☒ —

(B) If required, does the facility  
have the following equipment:

1. Internal communications or  
alarm systems?

☒ — —

Paging system

2. Telephone or 2-way radios  
at the scene of operations?

☒ — —

ADT Fire protect system

3. Portable fire extinguishers,  
fire control, spill control  
equipment and decontamination  
equipment?

☒ — —

WORKSE-IN ABC, 4 office, 6, span

Indicate the volume of water and/or foam available for fire control:

\_\_\_\_\_

(C) Testing and Maintenance of  
Emergency Equipment:

1. Has the owner or operator  
established testing and  
maintenance procedures  
for emergency equipment?

☒ — —

ANNUAL AUDIT  
by independent fire  
prot. consultant

2. Is emergency equipment  
maintained in operable  
conditions?

☒ — —

ADT Inspects sprinkler  
System monthly

(D) Has owner or operator provided  
immediate access to internal  
alarms? (if needed)

☒ — —

\*Not Inspected



- (E) Is there adequate aisle space for unobstructed movement?

V. CONTINGENCY PLAN AND EMERGENCY PROCEDURES:  
(Part 265 Subpart D)

- (A) Does the Contingency Plan contain the following information:

Yes No NI\* Remarks

1. The actions facility personnel must take to comply with §265.51 and 265.56 in response to fires, explosions, or any unplanned release of hazardous waste? (If the owner has a Spill Prevention, Control, and Countermeasures (SPCC) Plan, he needs only to amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with the requirements of this Part (as applicable.)
2. Arrangements agreed by local police departments, fire departments, hospitals, contractors, and State and local emergency response teams to coordinate emergency services pursuant to §265.37?
3. Names, addresses, and phone numbers (office and home) of all persons qualified to act as emergency coordinators?
4. A list of all emergency equipment at the facility which includes the location and physical description of each item on the list and a brief outline of its capabilities?
5. An evacuation plan for facility personnel where there is a possibility that evacuation could be necessary? (This plan must describe signal(s) to be used to begin evacuation, evacuation routes, and alternate evacuation routes?)

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	oral agreement
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Home Address & phone
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No written plan. Small facility, warehouse



## V. CONTINGENCY PLAN AND EMERGENCY PROCEDURES - Continued

	Yes	No	NI*	Remarks
(B) Are copies of the Contingency Plan available at site and local emergency organizations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>in process</u>
(C) Emergency Coordinator				
1. Is the facility Emergency Coordinator identified?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Is coordinator familiar with all aspects of site operation and emergency procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Does the Emergency Coordinator have the authority to carry out the Contingency Plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(D) Emergency Procedures				
If an emergency situation has occurred at this facility, has the Emergency Coordinator followed the emergency procedures listed in 265.56?				
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>No emergency to date</u>

## VI. MANIFEST SYSTEM, RECORDKEEPING, AND REPORTING (Part 265 Subpart E)

	Yes	No	NI*	Remarks
(A) Use of Manifest System				
1. Does the facility follow the procedures listed in §265.71 for processing each manifest?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are records of past shipments retained for 3 years?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(B) Does the owner or operator meet requirements regarding manifest discrepancies?				
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

\*Not Inspected



# VI. RECORDKEEPING - Continued

## (C) Operating Record

1. Does the owner or operator maintain an operating record as required in 265.73?

✓

2. Does the operating record contain the following information:

- \*\*b. The method(s) and date(s) of each waste's treatment, storage, or disposal as required in Appendix I?

✓

quan rec'd, shipped  
waste type, generator, dates

- c. The location and quantity of each hazardous waste within the facility?

✓

- \*\*\*d. A map or diagram of each cell or disposal area showing the location and quantity of each hazardous waste? (This information should be cross-referenced to specific manifest number, if waste was accompanied by a manifest.)

N/A

- e. Records and results of all waste analyses, trial tests, monitoring data, and operator inspections?

✓

- f. Reports detailing all incidents that required implementation of the Contingency Plan?

✓

Not needed to date

- g. All closure and post closure costs as applicable? (Effective 5-19-81)

✓

\*\* See page 33252 of the May 19, 1980, Federal Register.

\*\*\* Only applies to disposal facilities



VII. CLOSURE AND POST CLOSURE  
(Part 265 Subpart G)

	Yes	No	NI*	Remarks
(A) Closure and Post Closure				
1. Is the facility closure plan available for inspection by May 19, 1981?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Has this plan been submitted to the Regional Administrator	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Not yet required</u>
3. Has closure begun?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Is closure estimate available by May 19, 1981?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(B) Post closure care and use of property				
Has the owner or operator supplied a post closure monitoring plan? (effective by May 19, 1981)				<u>N/A</u>

VIII. FACILITY STANDARDS  
(Part 265, Subparts I thru R)

I  
USE AND MANAGEMENT OF CONTAINERS

Facility Name: McKesson Date of Inspection: 3-24-82

	Yes	No	NI*	Remarks
1. Are containers in good condition?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are containers compatible with waste in them?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Are containers stored closed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are containers managed to prevent leaks?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Are containers inspected weekly for leaks and defects?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Are ignitable & reactive wastes stored at least 15 meters (50 feet) from the facility property line? (Indicate if waste is ignitable or reactive.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>± 70' from edge of storage</u> <u>ignitable only (acetone)</u>



	Yes	No	NI*	Remarks
7. Are incompatible wastes stored in separate containers? (If not, the provisions of 40 CFR 265.17(b) apply.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>No incompatible - solvent only</u> <u>Stored</u>
8. Are containers of incompatible waste separated or protected from each other by physical barriers or sufficient distance?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>No incompatibles</u>

J  
TANKS

Facility Name: NA

Date of Inspection: \_\_\_\_\_

1. Are tanks used to store only those wastes which will not cause corrosion, leakage or premature failure of the tank?	_____	_____	_____	_____
2. Do uncovered tanks have at least 60 cm (2 feet) of freeboard, or dikes or other containment structures?	_____	_____	_____	_____
3. Do continuous feed systems have a waste-feed cutoff?	_____	_____	_____	_____
4. Are waste analyses done before the tanks are used to store a substantially different waste than before?	_____	_____	_____	_____
5. Are required daily and weekly inspections done?	_____	_____	_____	_____
6. Are reactive & ignitable wastes in tanks protected or rendered non-reactive or non-ignitable? Indicate if waste is ignitable or reactive. (If waste is rendered non-reactive or non-ignitable, see treatment requirements.)	_____	_____	_____	_____
7. Are incompatible wastes stored in separate tanks? (If not, the provisions of 40 CFR 265.17(b) apply.)	_____	_____	_____	_____



	Yes	No	NI*	Remarks
3. Has the owner or operator addressed the waste analysis requirements of 265.402?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are inspection procedures followed according to 265.403?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Are the special requirements fulfilled for ignitable or reactive wastes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Are incompatible wastes treated? (If yes, 265.17(b) applies.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Note: EPA has temporarily suspended the applicability of the requirements of the hazardous waste regulations in 40 CFR Parts 122, 264 and 265 to owners and operators of (1) wastewater treatment tanks that receive, store, and treat wastewaters that are hazardous waste or that generate, store or treat a wastewater treatment sludge which is a hazardous waste where such wastewaters are subject to regulation under Sections 402 or 307(b) of the Clean Water Act (33 U.S.C. 1251 et seq.) and (2) neutralization tanks, transport vehicles, vessels, or containers which neutralize wastes which are hazardous only because they exhibit the corrosivity characteristic under 40 CFR §261.2 or are listed as hazardous wastes in Subpart D of 40 CFR Part 261 only for this reason

#### IX

Complete this section if the owner or operator of a TSD facility also generates hazardous waste that is subsequently shipped off-site for treatment, storage, or disposal.

#### 1. MANIFEST REQUIREMENTS

	Yes	No	NI*	Remarks
(A) Does the operator have copies of the manifest available for review?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(B) Do the manifest forms reviewed contain the following information: (If possible, make copies of, or record information from, manifest(s) that do not contain the critical elements)				
1. Manifest document number?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Name, mailing address, telephone number, and EPA ID Number of Generator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



	Yes	No	NI*	Remarks
3. Name and EPA ID Number of Transporter(s)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Name, address, and EPA ID Number of Designated permitted facility and alternate facility?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The description of the waste(s) (DOT shipping name, DOT hazard class, DOT identification number)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The total quantity of waste(s) and the type and number of containers loaded?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Required certification?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Required signatures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(C) Does the owner or operator submit exception reports when needed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Not needed to date

## 2. PRE-TRANSPORT REQUIREMENTS

(A) Is waste packaged in accordance with DOT Regulations? (Required prior to movement of hazardous waste off-site)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(B) Are waste packages marked and labeled in accordance with DOT regulations concerning hazardous waste materials? (Required to movement of hazardous waste off-site)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(C) If required, are placards available to transporters of hazardous waste?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



Omit Section 3 if the facility has interim status and its Part A permit application describes storage

### 3. On Site Accumulation

	Yes	No	NI*	Remarks
1. Are containers marked with start of accumulation date?	—	—	—	<u>STORAGE facility</u>
2. Are the containers of hazardous waste removed from installation before they can accumulate for more than 90 days?	—	—	—	
3. Are wastes stored in containers managed in accordance with 40 CFR Part 265.174 and 265.176 (weekly inspections of containers, containers holding ignitable or reactive wastes located at least 15 meters (50 Feet) from facility's property line)?	—	—	—	
4. If wastes are stored in tanks, are the tanks managed according to the following requirements?				
a. Are tanks used to store only those wastes which will not cause corrosion leakage or premature failure of the tank?	—	—	—	
b. Do uncovered tanks have at least 60 cm (2 feet) of freeboard, dikes, or other containment structures?	—	—	—	
c. Do continuous feed systems have a waste-feed cutoff?	—	—	—	
d. Are required daily and weekly inspections done?	—	—	—	
e. Are reactive & ignitable wastes in tanks protected or rendered non-reactive or non-ignitable? (If waste is rendered non-reactive or non-ignitable, see treatment requirements?)	—	—	—	
f. Are incompatible wastes stored in separate tanks? (If not, the provisions of 40 CFR §265.17(b) apply)	—	—	—	



VI. RECORDKEEPING and REPORTING  
(Part 262, Subpart D)

	Yes	No	NI*	Remarks
(A) Are Manifests, Annual Reports, Exception Reports, and all test results and analyses retained for at least three years?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(B) Has the generator submitted Annual Reports and Exception Reports as required?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Not yet required

VII. INTERNATIONAL SHIPMENTS  
(Part 262, Subpart E)

Has the installation imported or exported Hazardous Waste?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
--	--------------------------	-------------------------------------	--------------------------	--

(If answered Yes, complete the following as applicable.)

1. Exporting Hazardous waste, has a generator:				
a. Notified the Administrator in writing?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Obtained the signature of the foreign consignee confirming delivery of the waste(s) in the foreign country?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Met the Manifest requirements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Importing Hazardous Waste, has the generator:				
Met the manifest requirements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



X  
TRANSPORTER REQUIREMENTS  
40 CFR Part 263

Complete this Section if the owner or operator transports hazardous waste.

I. MANIFEST SYSTEM AND RECORDKEEPING  
(Subpart B)

	Yes	No	NI*	Remarks
Are copies of the completed manifests or shipping paper(s) available for review and retained for three years?	<u>N/A</u>	_____	_____	_____

II. INTERNATIONAL SHIPMENTS

A. Does the transporter record on the manifest the date the waste left the U.S.?	_____	_____	_____	_____
B. Are signed completed manifest(s) on file?	_____	_____	_____	_____

V. MISCELLANEOUS

A. Does transporter transport hazardous waste into the U.S. from abroad?	_____	_____	_____	_____
B. Does the transporter mix hazardous waste of different DOT shipping descriptions by placing them into a single container?	_____	_____	_____	_____

NOTE: If (A) or (B) were answered "Yes" then the Transporter is also a Generator and must comply with the Generator regulations.

\*Not Inspected



## REMARKS

Use this section to briefly describe site activities observed at the time of the inspection. Note any possible violations of Interim Status Standards.

This site's basic activity is that of a warehouse/distribution facility of McKesson products. The hazardous waste activity results from the site's accepting of waste solvent from customers which is stored until shipment to another McKesson site for recycling/disposal. The site is also considered a generator and as such is required to complete new manifests for wastes which are shipped. The US EPA HW. numbers for these wastes are F001, F003, F005. Wastes stored on site are all maintained properly, in 55 gal drums. The storage area is a portion of a drum storage pad, concrete based and fenced. The H.W. is stored on the N.E. portion of the pad w/ the remainder used for virgin material.

The following deficiencies in RCRA compliance were determined as the result of the inspection. ① Operator Inspection: Lacking records of a) malfunctions, b) operator error, c) discharges. ② Contingency plan: lacking a) home phone #'s & Address of emergency coordinators and b) plan was not on file with local emergency response teams. All other requirements appeared to be fulfilled at the time of this inspection.



**D. Corrective  
Action**



PRC Environmental Management, Inc.  
233 North Michigan Avenue  
Suite 1621  
Chicago, IL 60601  
312-856-8700  
Fax 312-938-0118



**PRELIMINARY ASSESSMENT/  
VISUAL SITE INSPECTION**

**VAN WATERS & ROGERS FACILITY  
SCHAUMBURG, ILLINOIS**

**ILD 000 819 938**

**FINAL REPORT**

**Prepared for**

**U.S. ENVIRONMENTAL PROTECTION AGENCY  
Office of Waste Programs Enforcement  
Washington, DC 20460**

Work Assignment No.	:	C05087
EPA Region	:	5
Site No.	:	ILD 000 819 938
Date Prepared	:	February 3, 1993
Contract No.	:	68-W9-0006
PRC No.	:	009-C05087IL6V
Contractor Project Manager	:	Shin Ahn
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## ATTACHMENTS

- A EPA PRELIMINARY ASSESSMENT FORM 2070-12
- B VISUAL SITE INSPECTION SUMMARY AND PHOTOGRAPHS
- C VISUAL SITE INSPECTION FIELD NOTES



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## EXECUTIVE SUMMARY

Dynamac Corporation (Dynamac) performed a preliminary assessment and visual site inspection (PA/VSI) to identify and assess the likelihood of releases from solid waste management units (SWMU) and other areas of concern (AOC) at the Van Waters & Rogers, Inc. (VWR), facility in Schaumburg, Illinois. This summary highlights the results of the PA/VSI and the potential releases of hazardous wastes or hazardous constituents from SWMUs and AOCs identified. In addition, a completed U.S. Environmental Protection Agency (EPA) Preliminary Assessment Form (EPA Form 2070-12) is included in Attachment A to assist in prioritization of RCRA facilities for corrective action.

The VWR facility is a wholesale chemical warehouse and distribution center. The facility supplies industrial chemicals to off-site customers. VWR does not conduct any on-site treatment or disposal activities, or manufacturing or processing activities at the facility. The majority of the wastes managed at the facility consist of a variety of hazardous waste solvents generated by off-site customers. On an intermittent basis, the facility also manages damaged or off-specification products that cannot be returned to the manufacturer or sold as downgraded products.

The hazardous waste solvents managed at the facility in 1991 included spent 1,1,1-trichloroethane (TCA) (F001, F002); spent methylene chloride (F002); spent flammable liquid with mineral spirits and TCA (F002); spent flammable liquid with glycol ethers (F002); spent flammable liquid with trichlorotrifluoroethane (F002); spent oil with combustible liquid (F002); spent perchloroethylene (F001); spent flammable liquid with acetone and tetrachloroethylene (PCE) (F001, F003, D001, D039); spent hazardous waste liquid with trichlorofluoromethane (F001); spent flammable liquid with toluene and xylene (F003, F005); spent flammable liquid with acetone and toluene (D001, F003, F005); waste combustible liquid with polyalkaline glycol and oil (D001); waste flammable liquid with isophthalic acid and 1-methoxy-2-propanol (D001); waste flammable liquid with aliphatic naphtha (D001); waste flammable liquid with oil (D001); and waste flammable liquid with isopropanol (D001). Dynamac notes the wastes codes listed above are those assigned by the facility; some of these wastes were likely to have exhibited an ignitable characteristic (D001). VWR last managed damaged or off-specification product waste at the facility in 1988; during that year, the facility managed unused TCA (U226) as hazardous waste.

McKesson Chemical Company (McKesson) began operations at this location in 1980. VWR purchased McKesson and the facility in 1986. The facility currently employs approximately 21 persons, 7 of whom work in the warehouse area. The facility consists of a single building of approximately 50,500 square feet, an adjoining 11,100-square-foot outdoor raw material storage area along the east side of the building, and a 12,600-square-foot parking lot along the south side of the building. The facility is currently regulated as a transporter and RCRA Interim Status storage facility. According to Jim Hooper, Regulatory Manager, VWR, the facility plans to undergo RCRA closure of its interim status Container Storage Area (SWMU 1) prior to November 1992.



DATE 5/13/98  
PIN # 2029-98  
INITIALS [signature]

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The PA/VSI identified the following two SWMUs at the facility:

1. Container Storage Area
2. Warehouse Storage Area

The PA/VSI did not identify any AOCs at the facility.

The potential for a release to the ground water, surface water, on-site soils, and the air from either SWMU is low. SWMU 1 is located outside in the northeast corner of the concrete outdoor raw material storage area. The unit consists of a designated 384-square-foot portion of the concrete pad and stores waste in closed 55-gallon drums and 350-gallon portable steel containers. The unbermed concrete pad has no visible cracks and slopes toward a closed drain located in the center of the outdoor raw material storage area. SWMU 2 consists of a 200-square-foot concrete area located inside the warehouse on a concrete floor with no floor drains and manages waste on an intermittent basis in closed containers. There is no history of documented releases at the facility.

Ground water in the area of the facility is not used as an industrial or drinking water source. According to Dave Varner, Utilities Superintendent, Schaumburg Department of Public Works, the City of Schaumburg obtains its drinking water from Lake Michigan; there are no active ground water wells in the city. However, the city does maintain seven bedrock ground water wells for emergency backup, should they be necessary. The nearest of these wells is located one mile northeast and upgradient of the facility, and draws from a confined deep bedrock aquifer. A release to ground water would not be likely to impact any human or environmental receptors.

The nearest surface water body, Salt Creek, is located about three-quarter mile northeast of the facility. Salt Creek is used for fishing, as well as for some industrial uses. Industrial uses for Salt Creek include non-contact cooling water discharge and treated sanitary water discharge. Salt Creek is not used for drinking water purposes. Other surface water bodies in the area include numerous intermittent streams, and an approximately 15-acre man made pond located about one-half mile north of the facility.

The nearest wetland consists of a seasonally flooded marsh area approximately 10 acres in size. This wetland is located approximately one-eighth mile northwest of the facility. There are numerous other seasonally and semi-permanently flooded wetlands ranging in size from approximately two acres to twenty-five acres which are located within two miles of the facility.

Access to the facility's outdoor raw material storage area, where the Container Storage Area (SWMU 1) is located, is controlled by an eight-foot high chain-link fence. The facility's warehouse and office area are closed structures with locking doors. The nearest residences are located approximately two-thirds of a mile northeast of the facility. The



nearest school, Harper College, is located approximately one mile northwest of the facility. The nearest primary school, Twinbrook School, is located approximately one and one-quarter miles south of the facility. There are three other schools located within two miles of the facility.

Dynamac recommends VWR complete RCRA closure of the Container Storage Area (SWMU 1) according to an approved closure plan prior to November 8, 1992.

RELEASE  
DATE 5/13/98  
RIN # 2039-98  
INITIALS ty

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## 1.0 INTRODUCTION

PRC Environmental Management, Inc. (PRC), received Work Assignment No. C05087 from the U.S. Environmental Protection Agency (EPA) under Contract No. 68-W9-0006 (TES 9) to conduct preliminary assessments (PA) and visual site inspections (VSI) of hazardous waste treatment and storage facilities in EPA Region 5. PRC assigned Dynamac Corporation (Dynamac), its TES 9 subcontractor, to conduct the PA/VSI for the Van Waters & Rogers, Inc. (VWR), facility in Schaumburg, Illinois.

As part of the EPA Region 5 Environmental Priorities Initiative, the RCRA and CERCLA programs are working together to identify and address RCRA facilities that have a high priority for corrective action using applicable RCRA and CERCLA authorities. The PA/VSI is the first step in the process of prioritizing facilities for corrective action. Through the PA/VSI process, enough information is obtained to characterize a facility's actual or potential releases to the environment from solid waste management units (SWMU) and areas of concern (AOC).

A SWMU is defined as any discernible unit at a RCRA facility in which solid wastes have been placed and from which hazardous constituents might migrate, regardless of whether the unit was intended to manage solid or hazardous waste.

The SWMU definition includes the following:

- RCRA-regulated units, such as container storage areas, containers, surface impoundments, waste piles, land treatment units, landfills, incinerators, and underground injection wells
- Closed and abandoned units
- Recycling units, waste water treatment units, and other units that EPA has generally exempted from standards applicable to hazardous waste management units
- Areas contaminated by routine and systematic releases of wastes or hazardous constituents. Such areas might include a wood preservative drippage area, a loading-unloading area, or an area where solvent used to wash large parts has continually dripped onto soils.

An AOC is defined as any area where a release to the environment of hazardous waste or constituents has occurred or is suspected to have occurred on a non-routine and nonsystematic basis. This includes any area where such a release in the future is judged to be a strong possibility.



The purpose of the PA is as follows:

- Identify SWMUs and AOCs at the facility.
- Obtain information on the operational history of the facility.
- Obtain information on releases from any units at the facility.
- Identify data gaps and other informational needs to be filled during the VSI.

The PA generally includes review of all relevant documents in files located at state offices and at the EPA Region 5 office in Chicago.

The purpose of the VSI is as follows:

- Identify SWMUs and AOCs not discovered during the PA.
- Identify releases not discovered during the PA.
- Provide a specific description of the environmental setting.
- Provide information on release pathways and the potential for releases to each medium.
- Confirm information obtained during the PA regarding operations, SWMUs, AOCs, and releases.

The VSI includes interviewing appropriate facility staff, inspecting the entire facility to identify all SWMUs and AOCs, photographing all SWMUs, identifying evidence of releases, initially identifying potential sampling locations, and obtaining all information necessary to complete the PA/VSI report.

This report documents the results of the PA/VSI of the VWR facility located in Schaumburg, Illinois, EPA ID No. ILD 000 819 938. The PA was completed on March 25, 1992. Dynamac gathered and reviewed information from files at the Division of Land Pollution Control and the Division of Water Pollution Control at the Illinois Environmental Protection Agency (IEPA) Springfield, Illinois, office and from EPA Region 5 RCRA files. In addition, Dynamac gathered information from maps published by the U.S. Geological Survey (USGS) and the U.S. Department of the Interior (USDI).

Joseph Weslock and Deborah Hall of Dynamac conducted the VSI on April 8, 1992. The VSI included an interview with James Hooper, Regulatory Manager, and John Tobin, Area Operations Manager, both of VWR. The VSI also included a walk-through inspection of the facility. Dynamac identified two SWMUs and no AOCs during the PA/VSI. Dynamac completed EPA Form 2070-12 using information gathered during the PA/VSI. This form is included in Attachment A. The VSI is summarized along with 1 inspection photograph in Attachment B. Field notes from the VSI are included in Attachment C.



## 2.0 FACILITY DESCRIPTION

This section describes the facility's location, past and present operations (including waste management practices), waste generating processes, history of documented releases, regulatory history, environmental setting, and receptors.

### 2.1 FACILITY LOCATION

The VWR facility is located at 2055 Hammond Drive in Schaumburg, Cook County, Illinois (latitude 42° 04' 00" N and longitude 88° 02' 18" W) (McKesson, 1980c), as shown in Figure 1. The facility occupies approximately two and three-quarter acres of land in an industrial park.

The VWR facility is bordered on the west by Hammond Drive, on the east by a low-lying, grassy area, on the north by the A.I.T. Company, and on the south by the Seivert Corporation.

### 2.2 FACILITY OPERATIONS

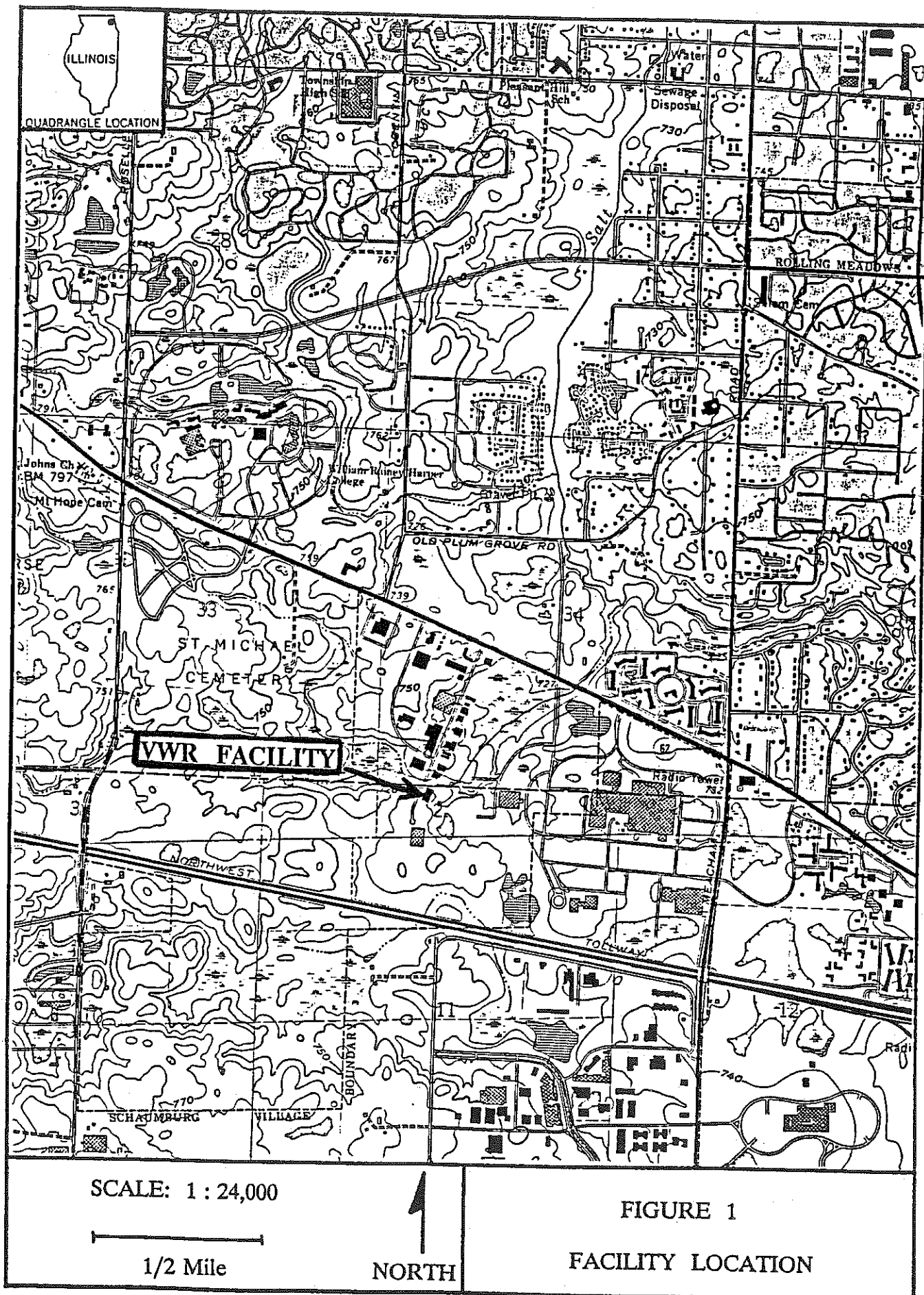
The VWR facility is a wholesale chemical warehouse and distribution center. The facility supplies industrial chemicals to off-site customers. In addition, VWR accepts, stores, and transports certain hazardous waste solvents generated by off-site customers. Wastes managed at the facility consist of a variety of waste solvents generated by off-site customers and damaged or off-specification products that cannot be returned to the manufacturer or sold as downgraded products. The type of hazardous waste solvents and damaged or off-specification products which are managed as wastes by the facility varies depending on the needs of the facility's customers. VWR does not conduct any on-site treatment or disposal activities, or manufacturing or processing activities at the facility.

In 1980, the McKesson Chemical Company built the facility and began chemical warehousing and distribution operations. Prior to the construction of the warehouse the land was used for agricultural purposes. In November 1986, VWR purchased the McKesson Chemical Company and this facility. There were no operational changes.

The facility currently employs approximately 21 persons, 7 of whom work in the warehouse area. The facility occupies an approximately two and three-quarter-acre parcel which includes a single building of approximately 50,500 square feet, and an adjoining 11,100-square-foot outdoor raw material storage area along the east side of the building. There is a 12,600-square-foot parking lot along the south side of the building. The outdoor raw material storage area is surrounded by an eight-foot high chain-link fence (See Photo No. 1).

The facility's waste streams are managed in two SWMUs. Waste solvents are stored outside in the Container Storage Area (SWMU 1). Damaged or off-specification products which are managed as wastes by the facility are stored indoors in the Warehouse Storage Area (SWMU 2). Facility SWMUs are identified in Table 1. The facility layout, including SWMU locations, is shown in Figure 2.





Source: modified from USGS, 1961



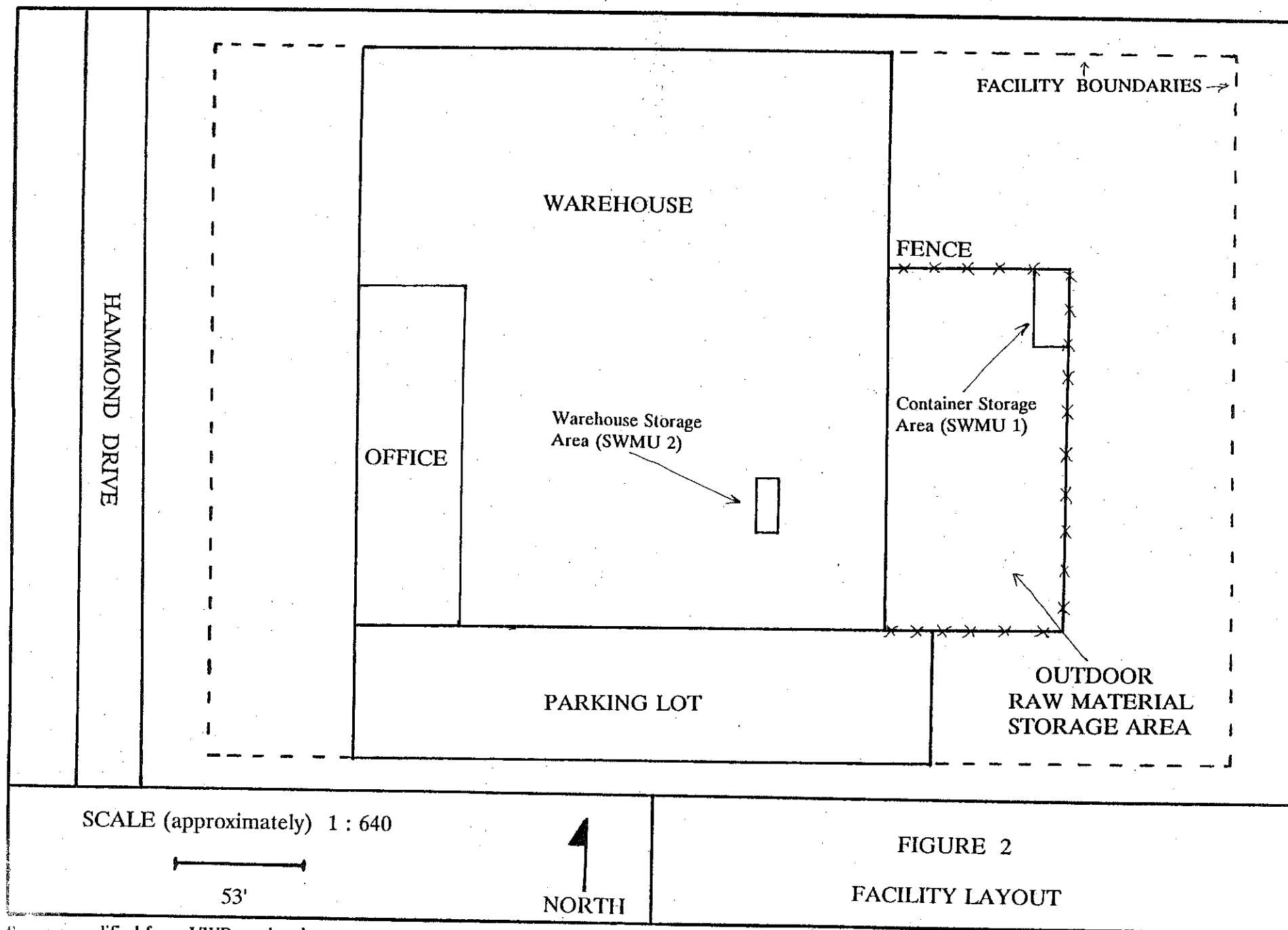
**TABLE 1**  
**SOLID WASTE MANAGEMENT UNITS (SWMU)**

SWMU Number	SWMU Name	RCRA Hazardous Waste Management Unit*	Status
1	Container Storage Area	Yes	Active for greater than 90-day storage of hazardous waste
2	Warehouse Storage Area	No	Active for storage of nonhazardous waste and less than 90-day storage of hazardous waste**

\* A RCRA hazardous waste management unit is one that currently requires or formerly required submittal of a RCRA Part A or Part B permit application.

\*\* Although this unit has not been used to manage waste since 1988, this unit remains active to manage damaged and off-specification product waste as it is generated.







## 2.3 WASTE GENERATING PROCESSES

The primary waste stream managed at the VWR facility is hazardous waste solvent generated off site by VWR customers. VWR collects and manages the hazardous waste solvents as a service to its customers. The hazardous waste solvents managed at the facility can be grouped into three categories: waste chlorinated solvents, waste non-chlorinated solvents, and waste ignitable solvents. On an intermittent basis, the facility also generates waste consisting of damaged or off-specification products that cannot be returned to the manufacturer or sold as downgraded products. Wastes managed at the facility are discussed below and are summarized in Table 2. Annual generation rates presented for the hazardous waste solvents are based on 1991 waste generation data. The facility last managed damaged or off-specification products as a waste in 1988; annual generation rates presented for this waste are based on 1988 waste generation data.

VWR transports hazardous waste solvents from off-site customers in 55-gallon drums and 350-gallon portable containers, and stores the wastes in the Container Storage Area (SWMU 1) prior to shipment off site for disposal. The volume of each hazardous waste solvent managed by the VWR facility varies depending on the customer's waste generation rate. During 1991, VWR managed a total of 21,861 gallons of hazardous waste solvents at the facility (VWR, 1992). In addition to its own trucks, VWR uses numerous off-site carriers to transport these wastes from the facility to a variety of licensed Treatment, Storage, Disposal (TSD) facilities. The carriers VWR uses most frequently include Burren Transfer Company in Elgin, Illinois; Chem Freight in Cleveland, Ohio; GSX Chemical Services, Inc., in Columbia, South Carolina; HazMat Environmental Group, Inc., in Buffalo, New York; M C Tank Transport in Hamilton, Ohio; Metropolitan Environmental, Inc., in Celina, Ohio; and Schneider Tank Lines in Green Bay, Wisconsin.

In 1991, the VWR facility stored a total of 3,500 gallons of waste chlorinated solvents in the Container Storage Area (SWMU 1). This volume included 1,090 gallons of spent 1,1,1-trichloroethane (TCA) (F001, F002); 605 gallons of spent methylene chloride (F002); 110 gallons of spent flammable liquid with mineral spirits and TCA (F002); 220 gallons of spent flammable liquid with glycol ethers (F002); 100 gallons of spent flammable liquid with trichlorotrifluoroethane (F002); 55 gallons of spent oil with combustible liquid (F002); 770 gallons of spent perchloroethylene (F001); 440 gallons of spent flammable liquid with acetone and tetrachloroethylene (PCE) (F001, F003, D001, D039); and 110 gallons of spent hazardous waste liquid with trichlorofluoromethane (F001) (VWR, 1992). Dynamac notes the waste codes listed are those assigned by the facility; some of these wastes were likely to have exhibited an ignitable characteristic (D001). Waste chlorinated solvents are primarily transported off site by one of the above-mentioned carriers to a TSD facility owned by Chemical Waste Management in West Carrollton, Ohio, for fuel blending or recycling.



**TABLE 2  
SOLID WASTES**

Waste/EPA Waste Code	Generation Rate <sup>a</sup>	Source	Primary Management Unit <sup>b</sup>
<b><u>Waste Chlorinated Solvents</u></b>			
Spent TCA/F001, F002	1090 gallons	Off-Site Customers	1
Spent Methylene Chloride/ F002	605 gallons	Off-Site Customers	1
Spent Flammable Liquid with Mineral Spirits and TCA/ F002	110 gallons	Off-Site Customers	1
Spent Flammable Liquid with Glycol Ethers/F002	220 gallons	Off-Site Customers	1
Spent Flammable Liquid with Trichlorotrifluoroethane/ F002	100 gallons	Off-Site Customers	1
Spent Oil with Combustible Liquid/F002	55 gallons	Off-Site Customers	1
Spent Perchloroethylene/ F001	770 gallons	Off-Site Customers	1
Spent Flammable Liquid with Acetone and PCE/F001, F003, D001, D039	440 gallons	Off-Site Customers	1
Spent Hazardous Waste Liquid with Trichlorofluoromethane/ F001	110 gallons	Off-Site Customers	1

<sup>a</sup> Generation rates are based on the quantity of waste managed at the facility in 1991.

<sup>b</sup> Primary management unit refers to the SWMU that currently manages or formerly managed the waste.



**TABLE 2 (continued)**  
**SOLID WASTES**

<u>Waste/EPA Waste Code</u>	<u>Generation Rate<sup>a</sup></u>	<u>Source</u>	<u>Primary Management Unit<sup>b</sup></u>
<b><u>Waste Non-Chlorinated Solvents</u></b>			
Spent Flammable Liquid with Toluene and Xylene/F003, F005	4,504 gallons	Off-Site Customers	1
Spent Flammable Liquid with Acetone and Toluene/D001, F003, F005	3,737 gallons	Off-Site Customers	1
<b><u>Waste Ignitable Solvents</u></b>			
Combustible Liquid with Polyalkaline Glycol and Oil/D001	2,550 gallons	Off-Site Customers	1
Flammable Liquid with Isophthalic Acid and 1-Methoxy-2-Propanol/D001	1,045 gallons	Off-Site Customers	1
Flammable Liquid with Aliphatic Naphtha/D001	275 gallons	Off-Site Customers	1
Flammable Liquid with Oil/D001	4,235 gallons	Off-Site Customers	1
Flammable Liquid with Isopropanol/D001	2,015 gallons	Off-Site Customers	1
<b><u>Damaged and Off-Specification Product Waste</u></b>			
Unused TCA/U226	55 gallons	Damaged or Off-Specification Product	2

<sup>a</sup> Generation rates are based on the quantity of waste managed at the facility in 1991, with the exception of the damaged and off-specification product waste, which was last managed at the facility in 1988.

<sup>b</sup> Primary management unit refers to the SWMU that currently manages or formerly managed the waste.



In 1991, the VWR facility stored a total of 8,241 gallons of waste non-chlorinated solvents in the Container Storage Area (SWMU 1). This volume included 4,504 gallons of spent flammable liquid with toluene and xylene (F003, F005) and 3,737 gallons of spent flammable liquid with acetone and toluene (D001, F003, F005) (VWR, 1992). Dynamac notes the waste codes listed for these wastes are those assigned by the facility; some of these wastes were likely to have exhibited an ignitable characteristic (D001). Waste non-chlorinated solvents are primarily transported off site by one of the above-mentioned carriers to the Laidlaw Environmental Services (Laidlaw) facility in Pecatonica, Illinois. This facility serves as a transfer station for the wastes; these wastes are either incinerated, recycled, or fuel blended.

In 1991, the VWR facility stored a total of 10,120 gallons of waste ignitable solvents at the Container Storage Area (SWMU 1) including 2,550 gallons of combustible liquid with polyalkaline glycol and oil (D001); 1,045 gallons of flammable liquid with isophthalic acid and 1-methoxy-2-propanol (D001); 275 gallons of flammable liquid with aliphatic naphtha (D001); 4,235 gallons of flammable liquid with oil (D001); and 2,015 gallons of flammable liquid with isopropanol (D001) (VWR, 1992). Waste ignitable solvents are primarily transported off site by one of the aforementioned carriers to a TSD facility owned by Systech in Pauling, Ohio, for fuel blending.

Damaged product is generated at the facility when containers of product are damaged during shipping or warehouse operations. Off-specification product is generated when a product does not meet the standards required for its use and/or the product is not sold in a timely manner. Damaged or off-specification products which cannot be returned to the manufacturer or sold as downgraded products are managed as wastes by the facility. The damaged and off-specification product waste, both hazardous and nonhazardous, is managed in the Warehouse Storage Area (SWMU 2), located in the southeast corner of the warehouse. The facility generates this waste only intermittently. There was no waste being managed in this unit at the time of the VSI, and the facility did not manage any waste at this unit in 1991. The last time the facility used this unit to manage damaged and off-specification product waste was in 1988. During 1988, the facility stored one 55-gallon drum of unused TCA (U226) as waste for less than 90 days at SWMU 2 prior to transporting the waste off site. Safety-Kleen Corporation transported the waste to its TSD facility in Dolton, Illinois, for recycling.

When the facility manages a nonhazardous damaged and off-specification product waste at this unit, the facility uses one of the previously mentioned carriers to transport the waste off site to the TSD facility owned by Laidlaw in Pecatonica, Illinois. This TSD facility serves as a transfer station for the waste.

## **2.4 HISTORY OF DOCUMENTED RELEASES**

There was no history of documented releases at the facility available in federal, state, or facility files at the time of the PA/VSI.



## 2.5 REGULATORY HISTORY

On August 14, 1980, McKesson submitted a Notification of Hazardous Waste Activity (Notification) identifying the facility as a generator and transporter of hazardous wastes (McKesson, 1980a). On November 10, 1980, McKesson submitted a subsequent Notification identifying the facility as a generator, transporter, and storage facility (McKesson, 1980b). On November 13, 1980, McKesson submitted a Part A Interim Status Permit Application (Part A) identifying the facility as a storage facility. The Part A identified a Container Storage Area (SWMU 1) located in the north east corner of the facility's outdoor raw material storage area and stated the facility annually stored a total of 261,000 pounds of F001 waste; 70,000 pounds of F003 waste; and 37,000 pounds of F005 waste (McKesson, 1980c).

On October 31, 1986, when VWR purchased McKesson and the facility, VWR submitted a subsequent Notification identifying the facility as a generator and transporter of hazardous wastes (VWR, 1986a). On that same date, VWR submitted a revised Part A identifying the facility as a storage facility. The revised Part A identified the facility's Container Storage Area (SWMU 1) as having a container storage capacity (S01) of 6,600 gallons. The revised Part A indicated the facility annually stored a total of 55,000 pounds of F001 waste; 55,000 pounds of F002 waste; 250,000 pounds of F003 waste; 10,000 pounds of F005 waste; and 50,000 pounds of D001 waste (VWR, 1986b). The facility is currently regulated as a transporter and RCRA Interim Status storage facility.

According to James Hooper of VWR, the facility plans to undergo RCRA closure of the Container Storage Area (SWMU 1) by November 1992. However, the facility did not have an approved closure plan at the time of the VSI. The Warehouse Storage Area (SWMU 2) does not require RCRA closure as it has never been used to store waste for greater than 90 days.

In the past, the VWR facility had some RCRA compliance problems. These violations, observed during a series of IEPA inspections between 1982 and 1988, pertained mainly to deficiencies in paperwork such as contingency plans, waste analysis plans, and inspection logs (IEPA, 1982, 1986a, 1986b, and 1988a). In addition, the facility received a Notice of Violation (NOV) during a 1988 inspection for failing to identify contents and to mark accumulation dates on all containers entering storage (EPA, 1988). The facility resolved the NOV and other violations; there were no apparent violations at the facility during a 1990 IEPA inspection (IEPA, 1988b, 1990).

The facility is not currently required to have any air permits or a National Pollutant Discharge Elimination System permit, and there are no underground storage tanks at the facility. There is no history of complaints about the facility, nor has there been any Superfund activity at the facility.



## **2.6 ENVIRONMENTAL SETTING**

This section describes the climate, flood plain and surface water, geology and soils, and ground water in the vicinity of the VWR facility.

### **2.6.1 Climate**

The VWR facility is located approximately 10 miles northwest of O'Hare International Airport, the nearest National Weather Service office. The climate in this area is continental with cold winters and warm summers. Lake Michigan, located about 18 miles east of the facility, has a moderating influence on temperature extremes. The average annual daily temperature is 49.2° fahrenheit (F). The highest average daily temperature is 73.0° F in July, and the lowest average daily temperature is 21.4° F in January. Mean annual precipitation is 33.34 inches (NOAA, 1990). Mean annual lake evaporation is approximately 30 inches and net annual precipitation is approximately 3 inches. The one-year 24-hour maximum rainfall is approximately 2.4 inches (NOAA, 1979). Average wind speed and direction is west-southwest at 10 miles per hour. The wind is strongest in April, at an average speed of 12 miles per hour from the west-southwest (NOAA, 1990).

### **2.6.2 Flood Plain and Surface Water**

The VWR facility is located in an area of minimal flooding outside the 100-year flood plain of any surface water body (FEMA, 1982). The nearest surface water body is Salt Creek, located about three-quarters mile northeast of the facility (USGS, 1961). Salt Creek is used for fishing, as well as for some industrial uses. Industrial uses for Salt Creek include non-contact cooling water discharge and treated sanitary water discharge. Salt Creek is not used for drinking water (IEPA, 1992).

Surface water drainage at the west half of the facility is toward a storm drain in a ditch along Hammond Avenue which discharges to the sanitary sewer. Surface water drainage at the east half of the facility is toward a swale located east of the facility which extends to a 10-acre wetland approximately one-quarter mile northeast of the facility. Surface water runoff from the outdoor raw material storage area and SWMU 1 is collected by a closed drain located in the center of the area (USDI, undated). All floor drains located indoors at the facility discharge to the sanitary sewer.

Other surface water bodies within two miles of the facility include numerous intermittent streams, and a 15-acre manmade pond located approximately one-half mile north of the facility (USDI, undated). A representative of the Schaumburg City Hall stated most ponds in the area are used for fishing, but could not be specific about the aforementioned pond (SCH, 1992).

The nearest wetland consists of a 10-acre seasonally flooded marsh area. The area is located approximately one-eighth mile northwest of the facility. There are numerous other seasonally and semi-permanently flooded ponds and marshes which vary in size from 5 to 15 acres located within two miles of the facility (USDI, undated).



### 2.6.3 Geology and Soils

The soils of the VWR facility are mapped as Grays silt loam and Sawmill silty clay loam. Grays silt loam is a deep, moderately well drained, moderately permeable soil formed on outwash plains. Sawmill silty clay loam is a deep, poorly drained, moderately permeable soil formed in alluvial material along upland drainageways (SCS, 1979).

The surficial deposits in the area around the VWR facility are mapped as glacial deposits of Wadsworth Till forming the Valparaiso Moraine. The Wadsworth Till is a gray clayey till with few cobbles and boulders (Lineback, 1979). Other till units as well as sands and gravels may underlie the Wadsworth Till. The surficial deposits at the VWR facility are approximately 165 feet in thickness (Willman, 1971).

The bedrock underlying the glacial deposits at the VWR facility is Silurian-age Edgewood Dolomite, which is the basal formation of the Silurian dolomite in Illinois and consists of white, gray, or tan dolomite which becomes increasingly shaley near the base. This dolomite is approximately 50 feet thick. Underlying the dolomite is the Ordovician-age Maquoketa Shale. The Maquoketa Shale is red and oolitic near the top, and gray green, with some interbedded shaley limestone, with increasing depth. The Maquoketa Shale is approximately 200 feet thick. Underlying the Maquoketa Shale are several thousand feet of Ordovician-age and Cambrian-age limestones and sandstones (Willman, 1971).

### 2.6.4 Ground Water

No ground water information specific to the VWR facility was available at the time of the PA/VSI. There is no available information on possible aquifers in the surficial unconsolidated deposits. There are two bedrock aquifers underlying the region of the VWR facility: a shallow bedrock aquifer and a deep bedrock aquifer. The shallow bedrock aquifer is the Silurian dolomite. This aquifer is an artesian aquifer that leaks upwards in much of the area because the overlying clayey till is an imperfect confining layer. Regional ground-water flow in this area is east and southeast and measured hydraulic conductivities average  $1 \times 10^{-4}$  centimeters per second. The deep bedrock aquifer underlies the Maquoketa Shale and comprises the Ordovician-age and Cambrian-age dolomites and sandstones. The Maquoketa shale serves as a confining layer over the deep bedrock aquifer (Hughes, Kraatz, and Landon, 1966). Ground-water flow direction in the deep bedrock aquifer is regionally to the east (Schicht, Adams, and Stall, 1976).

According to Dave Varner, Utilities Superintendent, Schaumburg Department of Public Works, the City of Schaumburg maintains seven ground water wells for emergency backup, should they become necessary. The nearest of these wells is located one mile northeast of the facility and draws from sandstone in the confined deep bedrock aquifer. Each of the other of these wells draws from limestones and sandstones in the deep bedrock aquifer at depths ranging from about 500 feet to 1,800 feet (SDPW, 1992).



## 2.7 RECEPTORS

The VWR facility occupies approximately two and three-quarter acres in an industrial area in Schaumburg, Illinois, which had a 1991 population of 68,586 persons (SCH, 1992).

The facility is bordered on the west by Hammond Drive, on the east by a low lying, grassy area, on the north by the A.I.T. Company, and on the south by the Seivert Corporation. The nearest residences are located approximately two-thirds of a mile northeast of the facility. The nearest school, Harper College, is located approximately one mile northwest of the facility. The nearest primary school, Twinbrook School, is located approximately one and one-quarter miles south of the facility. There are three other schools located within two miles of the facility (USGS, 1961). Access to the facility's outdoor raw material storage area, where the Container Storage Area (SWMU 1) is located, is controlled by an eight-foot high chain-link fence. The facility's warehouse and office area are closed structures with locking doors.

The nearest surface water body, Salt Creek, is located about three-quarters of a mile northeast of the facility (USGS, 1961). Salt Creek is used for fishing, as well as for some industrial uses. Industrial uses for Salt Creek include non-contact cooling water discharge from various facilities and treated sanitary water discharge (IEPA, 1992). Salt Creek is not used for drinking water purposes (SDPW, 1992). Other surface water bodies in the area include numerous intermittent streams, and an approximately 15-acre manmade pond located approximately one-half mile north of the facility (USDI, undated). A representative from Schaumburg City Hall stated most ponds in the area are used for fishing, but could not be specific about the aforementioned pond (SCH, 1992).

Ground water in the area of the facility is not used as an industrial or drinking water source. According to Dave Varner, Utilities Superintendent, Schaumburg Department of Public Works, the city maintains seven ground water wells for emergency backup; the nearest of these wells is located one mile northeast of the facility and draws from a confined deep aquifer (SDPW, 1992). There is no recharge to the confined aquifer from the ground surface in this area. Therefore a release to ground water would not be likely to impact any human receptors.

The nearest downgradient wetlands include two seasonally flooded marsh areas approximately two acres each in size. These wetlands are located approximately one-eighth of a mile southeast of the facility. The nearest upgradient wetlands include a seasonally flooded marsh area located one-eighth of a mile northwest of the facility and a semi-permanently flooded marsh area located one-quarter of a mile northeast of the facility. These two wetlands are approximately 15 acres each in size. In addition, there are numerous seasonally and semi-permanently flooded ponds within two miles of the facility (USGS, 1961; USDI, undated). There is a potential for a release to ground water to impact the nearby downgradient wetlands.



### 3.0 SOLID WASTE MANAGEMENT UNITS

This section describes the two SWMUs identified during the PA/VSI. The following information is presented for each SWMU; description of the unit, dates of operation, wastes managed, release controls, history of documented releases, and Dynamac's observations. Figure 2 shows the SWMU locations.

#### **SWMU 1**

#### **Container Storage Area**

##### **Unit Description:**

The Container Storage Area is located outside in the northeast corner of the concrete outdoor raw material storage area; the entire outdoor raw material storage area is fenced (See Photo No. 1). The unit consists of a 384-square-foot portion of the concrete pad and is used to store hazardous waste solvents generated off site by VWR customers. The unit has a capacity to store up to 6,600 gallons of waste in 55-gallon drums and 350-gallon steel portable containers. The unbermed concrete pad is sloped toward a closed drain located in the center of the outdoor raw material storage area.

##### **Date of Startup:**

This unit began operation in 1981.

##### **Date of Closure:**

This unit is active. The facility plans to undergo RCRA closure of this unit by November 1992, but did not have an approved closure plan at the time of the VSI.

##### **Wastes Managed:**

The unit manages a variety of hazardous waste solvents generated off site by VWR customers including spent TCA (F001, F002); spent methylene chloride (F002); spent flammable liquid with mineral spirits and TCA (F002); spent flammable liquid with glycol ethers (F002); spent flammable liquid with trichlorotrifluoroethane (F002); spent combustible liquid with oil (F002); spent perchloroethylene (F001); spent flammable liquid with acetone and PCE (F001, F003, D001, D039); spent hazardous waste liquid with trichlorofluoromethane (F001); spent flammable liquid with toluene and xylene (F003, F005); spent flammable liquid with acetone and toluene (D001, F003, F005); combustible liquid with polyalkaline glycol and oil (D001); flammable liquid with isophthalic acid and 1-methoxy-2-propanol (D001); flammable liquid with aliphatic naphtha (D001); flammable liquid with oil (D001); and flammable liquid with isopropanol (D001) (VWR, 1992). Dynamac notes the wastes codes listed above are those assigned by the facility; some of these wastes were likely to



have exhibited an ignitable characteristic (D001). Wastes are either transported off site for fuel blending or recycling, or are transported off site to a transfer station, which transports the waste to an appropriate TSD facility.

**Release Controls:** This unit stores waste in closed containers located on an unbermed concrete pad that slopes toward a closed drain. There are no other release controls associated with this unit.

**History of Documented Releases:** There is no history of documented releases at this unit.

**Observations:** Dynamac observed a concrete pad labeled "HAZARDOUS WASTE ONLY" in the northeast corner of the outdoor raw material storage area (See Photo No. 1). The unit contained six 55-gallon drums of hazardous waste and seven empty 350-gallon portable steel containers; all containers in the unit appeared to be sealed and in sound condition during the VSI. The 55-gallon drums were labeled and dated.

## **SWMU 2**

### **Warehouse Storage Area**

**Unit Description:** The Warehouse Storage Area consists of a 200-square-foot area located on a concrete floor inside the warehouse (photo not available). Wastes managed by this unit are damaged or off-specification products that cannot be returned to the manufacturer or sold as downgraded products. There are no floor drains in the area of this unit.

**Date of Startup:** This unit began operation in 1981.

**Date of Closure:** This unit is currently active for storage of nonhazardous wastes and less than 90-day storage of hazardous wastes.

**Wastes Managed:** This unit manages damaged or off-specification products that cannot be returned to the manufacturer or sold as downgraded products. The facility generates this type of waste only intermittently. The facility last used this unit to manage waste in 1988. During 1988, the facility managed one 55-gallon drum of unused TCA (U226).

**Release Controls:** This unit manages waste indoors in closed containers located on a concrete floor with no floor drains.



History of

Documented Releases:

There is no history of documented releases at this unit.

Observations:

Dynamac observed a metal rack with three shelves in this unit (photo not available). There was no visible evidence of any stain or spills on the concrete floor in the area of the unit. At the time of the VSI, the unit did not contain any waste.



#### **4.0 AREAS OF CONCERN**

Dynamac did not identify any AOCs at the VWR facility during the PA/VSI. The facility is relatively new; all product storage areas have sound containment and there is no history of documented releases at the facility.



RELEASED  
DATE 5/13/98  
RIN 2030-98  
INITIALS JAS

ENFORCEMENT  
CONFIDENTIAL

## 5.0 CONCLUSIONS AND RECOMMENDATIONS

The PA/VSI identified two SWMUs and no AOCs at the VWR facility. Background information on the facility's location, operations, waste generating processes, history of documented releases, regulatory history, environmental setting, and receptors is presented in Section 2.0. SWMU-specific information, such as the unit's description, dates of operation, wastes managed, release controls, history of documented releases, and observed condition, is discussed in Section 3.0. Dynamac did not identify any AOCs at the facility during the PA/VSI. Following are Dynamac's conclusions and recommendations for each SWMU. Table 3 identifies the SWMUs at the VWR facility and recommended further actions.

### **SWMU 1                      Container Storage Area**

**Conclusions:**            The Container Storage Area is a 384-square-foot portion of the concrete outdoor raw material storage area (See Photo No. 1). This unit is used to store waste material from off site customers in closed 55-gallon drums and 350-gallon steel portable containers. The concrete pad is fenced and slopes toward a closed drain located in the center of the outdoor raw material storage area.

Due to the release controls described above, the unit has a low potential for release to ground water, surface water, on-site soils, and air.

**Recommendations:** The facility does not plan to submit a Part B Permit Application (Part B). Because EPA has required all facilities which have interim status to either undergo RCRA closure of all hazardous waste management units or have an effective Part B by November 8, 1992, Dynamac recommends VWR conduct RCRA closure of this unit according to an approved closure plan prior that date.

### **SWMU 2                      Warehouse Storage Area**

**Conclusions:**            The Warehouse Storage Area consists of a 200-square-foot area located on a concrete floor inside the warehouse (photo not available). Wastes are managed in closed containers at this unit; the waste consists of damaged or off-specification products that cannot be returned to the manufacturer or sold as downgraded products. There are no floor drains in the area of this unit.

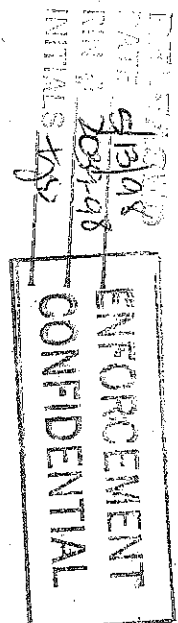
Due to the release controls described above, the unit has a low potential for a release to ground water, surface water, on-site soils, and air.

**Recommendations:** Dynamac recommends no further action for this SWMU.



**TABLE 3  
SWMU SUMMARY**

<u>Solid Waste Management Unit</u>	<u>Operational Dates</u>	<u>Evidence of Release</u>	<u>Suggested Further Action</u>
1. Container Storage Area	1981 to present	None	Conduct RCRA closure according to an approved closure plan
2. Warehouse Storage Area	1981 to present	None	None





## REFERENCES

- Federal Emergency Management Agency (FEMA), 1982. Flood Insurance Rate Map, Village of Schaumburg, Illinois.
- Hughes, Kraatz, and Landon, 1966. "Bedrock Aquifers of Northeastern Illinois," Illinois State Geological Survey, Circular No. 406.
- Illinois Environmental Protection Agency (IEPA), 1982. Letter to Dan Gallagher, McKesson Chemical Company (McKesson), regarding deficiencies recorded during a March 1982 IEPA inspection, from Ken Bechely, Field Operations Section, IEPA, May 7.
- IEPA, 1986a. RCRA Inspection Report for McKesson prepared by Caroline Panico, IEPA, March 25.
- IEPA, 1986b. RCRA Inspection Report for McKesson (follow-up inspection) prepared by Caroline Panico, IEPA, July 15.
- IEPA, 1988a. Inspection Report for Van Waters and Rogers, Inc. (VWR), prepared by John Maher, IEPA, February 18.
- IEPA, 1988b. Letter to John Pesek, VWR, regarding resolution of facility violations, from Angela Tin, Division of Land Pollution Control, IEPA, June 10.
- IEPA, 1990. Letter to Gerard Anastasia, VWR, regarding May 24, 1990 IEPA inspection, from William Radlinski, Division of Land Pollution Control, IEPA, June 20.
- IEPA, 1992. Telephone conversation between Ahmad Abvlaban, Water Pollution Control Division, IEPA, and Valerie Farrell, Dynamac Corporation (Dynamac), regarding surface water use of Salt Creek and Des Plaines Lake, May 13.
- Lineback, J.A., 1979. Quaternary Deposits in Illinois, Map, 1:500,000 scale.
- McKesson, 1980a. Notification of Hazardous Waste Activity (Notification), August 14.
- McKesson, 1980b. Subsequent Notification, November 10.
- McKesson, 1980c. Part A Permit Application (Part A), November 13.
- National Oceanic and Atmospheric Administration (NOAA), 1979. Climatic Atlas of the U.S., Ashville, NC.
- NOAA, 1990. Local Climatological Data for O'Hare International Airport, Illinois.



## REFERENCES (continued)

- Schaumburg City Hall (SCH), 1992. Telephone conversation between a Switchboard Operator, SCH, and Deborah Hall, Dynamac regarding Schaumburg population and surface water use, May 1.
- Schaumburg Department of Public Works (SDPW), 1992. Telephone conversation between Dave Varner, Utilities Superintendent, Schaumburg Department of Public Works, and Deborah Hall, Dynamac, regarding ground water use, May 1.
- Schicht, Adams, and Stall, 1976. Water Resources Availability, Quality, and Cost in Northeastern Illinois, Illinois Geological Survey Report of Investigation No. 83.
- Soil Conservation Service (SCS), 1979. Soil Survey of DuPage County and Portions of Cook County, Illinois, May.
- U.S. Department of the Interior (USDI), undated. National Wetlands Inventory Map, 1:24,000 scale, Palatine, Illinois Quadrangle.
- U.S. Environmental Protection Agency (EPA), 1988. Notice of Violation to McKesson from February 18, 1988, IEPA inspection, April 12.
- U.S. Geological Survey (USGS), 1961. 7.5 Minute Series Topographic Map, Palatine, Illinois Quadrangle, 1:24,000, Photorevised 1972 and 1980.
- VWR, undated. Diagram of the facility layout indicating the location of the office, warehouse, and outdoor raw material storage area.
- VWR, 1986a. Subsequent Notification, October 31.
- VWR, 1986b. Revised Part A, October 31.
- VWR, 1992. 1991 Hazardous Waste Report for IEPA prepared by Stacey Damiani, ChemCare Coordinator, VWR, February 20.
- Willman, 1971. "Summary of the Geology of the Chicago Area," Illinois State Geological Survey, Circular No. 460.



**ATTACHMENT A**

**EPA PRELIMINARY ASSESSMENT FORM 2070-12**





POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT  
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER  
IL ILD000819938

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site) Van Waters and Rogers, Inc.		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER 2055 Hammond Drive			
03 CITY Schaumburg	04 STATE IL	05 ZIP CODE 60173	06 COUNTY Cook	07 COUNTY CODE	08 CONG DIST
09 COORDINATES LATITUDE 42 04 00 LONGITUDE 088 02 18.0					
10 DIRECTIONS TO SITE (Starting from nearest public road) Algonquin Road (Rt. 62) to Hammond Drive. South on Hammond Drive about 1/4 mile. Facility is on east side of Hammond Drive.					

III. RESPONSIBLE PARTIES

01 OWNER (If known) Same as above.		02 STREET (Business, mailing, residential) 			
03 CITY	04 STATE	05 ZIP CODE	06 TELEPHONE NUMBER ( )		
07 OPERATOR (If known and different from owner) 		08 STREET (Business, mailing, residential) 			
09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER ( )		
13 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: (Specify) <input type="checkbox"/> G. UNKNOWN					
14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply) <input checked="" type="checkbox"/> A. RCRA 301 (a) DATE RECEIVED: 08/14/92 <input type="checkbox"/> B. UNCONTROLLED WASTE SITE (CERCLA 103 (a)) DATE RECEIVED: / / <input type="checkbox"/> C. NONE MONTH DAY YEAR MONTH DAY YEAR					

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION <input checked="" type="checkbox"/> YES DATE 04/08/92 <input type="checkbox"/> NO MONTH DAY YEAR		02 (Check all that apply) <input type="checkbox"/> A. EPA <input checked="" type="checkbox"/> B. EPA CONTRACTOR <input type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: (Specify) CONTRACTOR NAME(S): Dynamac Corporation			
03 SITE STATUS (Check one) <input checked="" type="checkbox"/> A. ACTIVE <input type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN		04 YEARS OF OPERATION 1981 Present <input type="checkbox"/> UNKNOWN BEGINNING YEAR ENDING YEAR			
05 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED Wide variety of unused, as well as spent, chlorinated, non-chlorinated, and ignitable solvents (F001, F002, F003, F005, D001).					

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION

The potential for a release from the facility to impact the environment is low. There is a potential for a fire to occur at the facility due to the presence of solvents.

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Response) <input type="checkbox"/> A. HIGH (Inspection required promptly) <input type="checkbox"/> B. MEDIUM (Inspection required) <input checked="" type="checkbox"/> C. LOW (Inspection on next available date) <input type="checkbox"/> D. NONE (No further action needed, complete current disposition form)			
---	--	--	--

VI. INFORMATION AVAILABLE FROM

01 CONTACT Kevin Pierard		02 OF (Agency, Organization) U.S. EPA		03 TELEPHONE NUMBER 312 886-4448	
04 PERSON RESPONSIBLE FOR ASSESSMENT Joe Weslock Deborah Hall		05 AGENCY	06 ORGANIZATION Dynamac Corp.	07 TELEPHONE NUMBER 312 466-0222	08 DATE 04/08/92 MONTH DAY YEAR



**ATTACHMENT B**

**VISUAL SITE INSPECTION  
SUMMARY AND  
PHOTOGRAPHS**



## VISUAL SITE INSPECTION SUMMARY

Van Waters and Rogers Facility  
Schaumburg, Illinois  
ILD 000 819 938

Date: April 8, 1992

Facility Representatives: James Hooper, Regulatory Manager, Van Waters and Rogers, Inc. (VWR)  
John Tobin, Area Operations Manager, VWR

Inspection Team: Joseph Weslock, Dynamac Corporation  
Deborah Hall, Dynamac Corporation

Photographer: Joseph Weslock, Dynamac Corporation

Weather Conditions: Sunny; about 55° F

### Summary of Activities:

The visual site inspection (VSI) began at 9:00 a.m. with an introductory meeting. The inspection team discussed the purpose of the VSI and the agenda for the visit. Facility representatives then discussed the VWR facility's past and current operations, solid wastes generated, and release history. The inspection team gathered most of the information on a question-and-answer basis. VWR provided the inspection team with copies of the documents requested.

The VSI tour began at 9:40 a.m. The inspection team walked through the facility's warehouse to the outdoor storage area. Dynamac observed the Container Storage Area (SWMU 1), located in the northeast corner. This unit contained 6 closed 55-gallon drums of waste and 7 empty 350-gallon portable tanks. The unit was labelled "Hazardous Waste Only," and there were no visible stains. The inspection team then walked back into the warehouse where Dynamac observed the Warehouse Storage Area (SWMU 2), located in the southeast corner. This unit did not contain any waste at the time of the VSI.



Visual Site Inspection Summary  
VWR Facility  
April 8, 1992

The tour concluded at approximately 10:00 a.m., after which the inspection team held an exit interview with Messrs. Hooper and Tobin. The inspection team completed the VSI and left the facility at 10:10 a.m.



**PHOTOGRAPHS**

**VAN WATERS AND ROGERS, INC., FACILITY  
SCHAUMBURG, ILLINOIS**



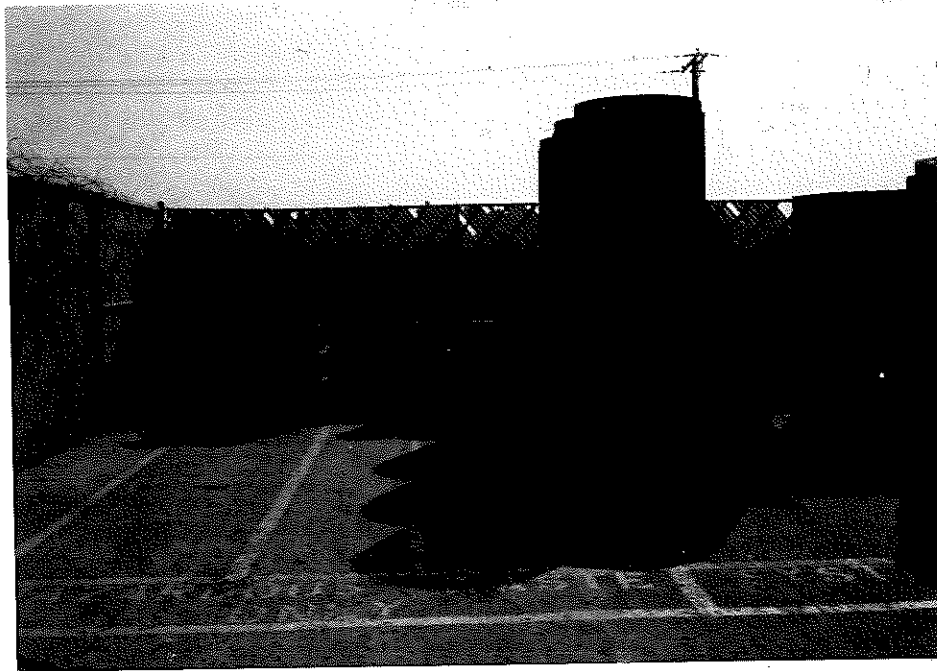


Photo No.: 1

Orientation: East

Description:

Location: SWMU 1

Date: April 8, 1992

Container Storage Area located in the northeast corner of the outdoor storage area. Each of the 350-gallon portable tanks in this area were empty at the time of the VSI.

END OF PHOTOGRAPHS



**ATTACHMENT C**  
**VISUAL SITE INSPECTION**  
**FIELD NOTES**



4/8/92

9:00 AM Van Winters & Rogers.  
Sunny, Approx 55°F

Joe Westlock & Deborah Hall,  
Dynamac Corp.

James P. Hooper  
Regional Regulatory Mgr.

John Tobin  
Area Operations Mgr.

Chemical Distribution Warehouse

VWR is subsidiary of Union

- watched corporate video which  
described business operations

facility purchases bulk  
chemicals (mostly pesticides here)  
& re-packages/re-sells



4/8/92  
This facility receives bulk  
& drummed goods. Waste  
is generated from receipt  
of spent products (mostly  
solvents) from customers.

No USTs & ASTs

No Air Stacks/Permitted  
only Sanitary WW

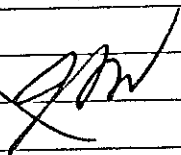
Van Buren acquired McCleskey in 1986

facility built in 1980.

No asbestos & PCB capacitors

No spills or releases

5169- SIC code





- + Port A 4/8/92  
Notified as storage facility.

uses 1 storage area

Drum + tote tanks 350-gallon  
DOT-steel  
carbon

inspected every other year.

still under Int. status

-> currently undergoing closure

-> will change operations to  
transfer facility only.

gates, locks, no x-tra security

5 AM - 7 PM, 5 days/week

21 total people; 7 in warehouse  
rest are

office

includes lunch dinner

9 AM



4/8/92

no history of complaints

plant houses are Apts  
across Morgan (1 1/2 mile)

surface draining to  
sanitary/storm sewer

surface body - Motorola Lake

3 TSD used.

fuel blending - flammable solvents  
Systech - Paulding, Ohio

recycling - chlorinated solvents  
CWM - West Carrollton, Ohio

other -

wire treatment } Land  
concretes } Laidlaw, Peatonika, IL

DM



4/8/92

9:40 - began walk through

Photo 1 - Waste Storage Area

<sup>2</sup>  
29 x Ft. (E)384 Ft<sup>2</sup>

6 drums D001/F003/F005

2 drums F002

- Empty portable Tanks

- concrete - no chain, couple  
cracks, no stems, no beams,  
yard behind fencesurface waste drain - 100 yds  
cont. goes to Motorola Lake

- neighbors - AIT (S)

10 AM - completed walk thru



6

4/8/92  
Acetone - self-transport

request list of transporters

conclusion discussion + left  
facility - 10:00 AM

gon





UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 5

77 WEST JACKSON BOULEVARD

CHICAGO, IL 60604-3590

RECEIVED MAY 06 1993  
WMD RCRA  
RECORD CENTER *Comp*

REPLY TO THE ATTENTION OF:

HRE-8J

April 21, 1993

Mr. James Hooper  
Regulatory Manager  
Van Waters and Rogers, Inc.  
2055 Hammond Drive  
Schaumburg, Illinois 60173

Re: Visual Site Inspection  
Van Waters and Rogers Facility  
Schaumburg, Illinois  
ILD 000 819 938

Dear Mr. Hooper:

The U.S. Environmental Protection Agency is enclosing a copy of the final Preliminary Assessment/Visual Site Inspection (PA/VSI) report for the referenced facility. The executive summary and conclusions and recommendations sections have been withheld as Enforcement Confidential.

If you have any questions, please call Francene Harris at (312) 886-2884.

Sincerely yours,

Kevin M. Pierard, Chief  
Minnesota/Ohio Technical Enforcement Section  
RCRA Enforcement Branch





UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
REGION 5  
77 WEST JACKSON BOULEVARD  
CHICAGO, IL 60604-3590

REPLY TO THE ATTENTION OF:

April 2, 1992

HRE-8J

John Tobin  
Area Operations Manager  
Van Waters and Rogers, Incorporated  
2055 Hammond Drive  
Schaumburg, Illinois 60173

Re: Visual Site Inspection  
Van Waters and Rogers,  
Incorporated  
Schaumburg, Illinois  
ILD 000 819 938

Dear Mr. Tobin:

The United States Environmental Protection Agency (U.S. EPA) Region V will conduct a Preliminary Assessment including a Visual Site Inspection (PA/VSI) at the referenced facility. This inspection is conducted pursuant to the Resource Conservation and Recovery Act, as amended (RCRA) Section 3007 and the Comprehensive Environmental Response, Compensation, and Liability Act, as amended (CERCLA) Section 104(c). The referenced facility has generated, treated, stored, or disposed of hazardous waste subject to RCRA. The PA/VSI requires identification and systematic review of all solid waste streams at the facility. The objective of the PA/VSI is to determine whether or not releases of hazardous wastes or hazardous constituents have occurred or are occurring at the facility which may require further investigation. This analysis will also provide information to establish priorities for addressing any confirmed releases.

The visual site inspection of your facility is to verify the location of all solid waste management units (SWMUs) and areas of concern (AOCs) to make a cursory determination of their condition by visual observation. The definitions of SWMUs and AOCs are included in attachment I. The VSI supplements and updates data gathered during a preliminary file review. During this site inspection, no samples will be taken. A sampling visit to ascertain if releases of hazardous waste or constituents have occurred may be required at a later date.

Assistance of some of your personnel may be required in reviewing solid waste flow(s) or previous disposal practices. The site inspection is to provide a technical understanding of the present and past waste flows and handling, treatment, storage, and disposal practices. Photographs of the facility are necessary to document the condition of units at the facility and the waste management practices used.



April 2, 1992

Page two

The VSI has been scheduled for April 8, 1992. The inspection team will consist of Joeseeph Weslock and Deborah Hall of Dynamac Corporation, contractors for the U.S. EPA. Representatives of the Illinois Environmental Protection Agency (IEPA) may also be present. Your cooperation in admitting and assisting them while on site is appreciated.

The U.S. EPA recommends that personnel who are familiar with present and past manufacturing and waste management activities be available during the VSI. Access to any relevant maps, diagrams, hydrogeologic reports, environmental assessment reports, sampling data sheets, environmental permits (air, NPDES), manifests and/or correspondence is also necessary, as such information is needed to complete the PA/VSI.

If you have any questions, please contact me at (312) 886-4448 or Francene Harris at (312) 886-2884. A copy of the Preliminary Assessment/Visual Site Inspection Report, excluding the Conclusions and Executive Summary portions, will be sent when the report is available.

Sincerely yours,

A handwritten signature in cursive script that reads "Francene L. Harris for".

Kevin M. Pierard, Chief  
OH/MN Technical Enforcement Section

attachment

cc: Larry Eastep, Permit Section, IEPA



## ATTACHMENT I

The definitions of solid waste management unit (SWMU) and area of concern (AOC) are as follows.

A SWMU is defined as any discernable unit where solid wastes have been placed at any time from which hazardous constituents might migrate, regardless of whether the unit was intended for the management of a solid or hazardous waste.

The SWMU definition includes the following:

- o RCRA regulated units, such as container storage areas, tanks, surface impoundments, waste piles, land treatment units, landfills, incinerators and underground injection wells
- o Closed and abandoned units
- o Recycling units, wastewater treatment units, and other units that U.S. Environmental Protection Agency has generally exempted from standards applicable to hazardous waste management units
- o Areas contaminated by routine and systematic releases of wastes or hazardous constituents, such as wood preservative treatment dripping areas, loading or unloading areas, or solvent washing areas

An AOC is defined as any area where a release to the environment of hazardous wastes or constituents has occurred or is suspected to have occurred on a nonroutine or a nonsystematic basis. This includes any area where such a release in the future is judged to be a strong possibility.